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# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
**THE NURSING RECORD**  
EDITED BY MRS BEDFORD FENWICK

No. 1,657.

SATURDAY, JANUARY 3, 1920.

Vol. LXIV

## EDITORIAL.

### ENTER THE NURSING PROFESSION. THE NURSES' VALE, 1919.

You were a babe a year ago, where old and new  
years meet,  
With but a sorry heritage to trip your eager feet!  
What hope and faith to justify, what ugly  
wrongs to heal!  
What giants in fair fight to slay for the great  
human weal!  
To-day we see you bowed and spent, where all the  
old years stood,  
We give you tears, we give you *thanks*, dear  
Comrade who "made good."

C. B. M.

The year 1919 will be for ever memorable in the annals of Nursing in the United Kingdom as the year which saw its establishment on the firm foundation of the professional franchise. Our thanks, indeed, are due to our "dear Comrade who 'made good.'"

Looking forward into the New Year with hope and aspiration, we realise that the immediate duty of each member of the new Profession of Nursing is to "make good." Hitherto the majority of nurses, though they may be skilled and conscientious in the performance of their duties, have given little thought to the development of nursing as a whole, for the benefit and service of the public. They have taken little trouble to inform themselves on matters which intimately concern its welfare and efficiency, and they have not studied its history and literature. For instance, how many of those who read these words have read, from cover to cover, the four volumes of "A History of Nursing," by Professor M. Adelaide Nutting, R.N., and Miss L. L. Dock, R.N.? Yet no nurse who has not, can be well informed as to the various phases of the development of nursing as a profession, or its present position in the various countries of the world.

The watchword, then, for the year upon which we are now entering should, for every nurse, be

"responsibility." Responsibility to the honourable and honoured profession of which she is a member, that she should hold its honour high, and do everything in her power to maintain and increase its efficiency and prestige. Responsibility to the community for whose service the Profession of Nursing exists. Responsibility with regard to social questions, for understanding and studying the problems which affect the community as a whole—its health, its welfare, and the underlying causes which promote or adversely influence them.

Again, there is the responsibility to support professional organisations; to carefully discriminate between the spurious and the true; and then to give personal service for the professional good. The British Medical Association, with its splendid Journal, is an example of what it is possible to achieve through organisation and solidarity. Let every member of the Profession of Nursing, therefore, go forward into the New Year determined that she will develop that sense of responsibility which is the foundation of all real progress.

"There is a time in every man's education when he must take himself for better or worse as his portion; that though the wide universe is full of good, no kernel of nourishing corn can come to him but through his toil bestowed on that plot of ground which is given him to till. The power which resides in him is new in nature, and none but he knows what that is which he can do, nor does he know until he has tried."

Our sincere wish for all our readers is that the New Year may bring them happiness and success, especially the happiness which comes from the development of hitherto untested powers and talents.

"We will not anticipate the past so much, young people—our retrospection will be all to the future."



## OUR PRIZE COMPETITION.

DESCRIBE THE APPEARANCE OF THE SKIN IN (a) ECZEMA, (b) PSORIASIS, (c) RINGWORM, (d) LUPUS. HOW ARE THESE DISEASES TREATED?

We have pleasure in awarding the prize this week to Miss E. O. Walford, Maldon Road, Colchester.

### PRIZE PAPER.

(a) *Eczema* may appear without any apparent cause, or may be due to (i) Too free action of the sweat glands or any occupation necessitating constant moisture of the skin, as laundry work; (ii) irritating soap, or irritants, as carbolic, washing soda, exposure to sun, clothes containing irritating dyes, discharges from nose, ears, etc.; (iii) poisons in the blood, as in gouty, diabetic or rheumatic patients.

The skin burns, irritates and becomes red. Numerous vesicles appear which burst and discharge a watery fluid; this, when dry, stiffens the clothing, or if unabsorbed, dries into white scales. The vesicles, running together, form a large, raw sore.

*Treatment.* Remove or treat the cause. Woollen or dyed clothes must not be worn next the skin. Use warm water softened with oatmeal or bran, no soap, and dry thoroughly afterwards, but wash as little as possible. Soften any hard scabs with warm olive oil and remove them before dressing with ung. metal-lorum, calamine lotion, or starch, zinc and boric powder. Protect the patient from extremes of heat and cold; if a child, tie his hands in cotton wool to prevent him from scratching. Give a light diet, avoiding salt or highly seasoned food. Keep the bowels acting freely. Iron and arsenic are often ordered.

(b) *Psoriasis* is a hereditary disease, the cause of which is unknown; it generally appears first in early life, and may recur in spring and autumn; it is sometimes associated with gout or rheumatism. It starts with raised red patches covered with dry silvery white scales. These patches appear chiefly on the elbows, knees, and backs of the forearms, but in bad cases may affect the whole of the body.

*Treatment.* Give hot baths, using a good soap, to remove the scales; then tar or chrysarobin ointment is generally applied. If the skin becomes inflamed, calamine lotion may be used. Arsenic is frequently ordered. Any pre-disposing cause will be treated.

(c) *Ringworm* is due to a fungus which attacks the skin of the body or the scalp (*tinea tonsurans*). It starts as a small red scurfy spot, which spreads and forms a ring. The edge is well defined, the centre paler; there may be one or more rings. In *tinea ton-*

*surans* the patch is first seen covered with thin hair, which is soon destroyed, so only broken and twisted hair is left.

*Treatment.* Shave the whole head or a large area round the patch and apply carbolic and sulphur ointment  $\bar{a}\bar{a}$  or mercury and vaseline  $\bar{a}\bar{a}$  twice daily, or paint the patch with Tr. Iodi. If available, X-ray treatment or zinc or copper ionization will probably be ordered. Pull out and burn loose hairs. The patient must never use any cap, brush, towel, etc., but his own; wash the latter frequently, and place a paper lining, which must be renewed daily, in the former.

(d) *Lupus* is caused by the tubercle bacilli. It may attack the lining membrane of nose or mouth, or the skin anywhere, but it is more common on the face.

There are two forms: (i) *Lupus vulgaris*, which usually appears before the age of 21, starts as a soft yellow nodule, resembling a piece of apple jelly. Other nodules form, join together and burst; this continues spreading and eating into the flesh and even the bone; (ii) *Erythematous lupus*, which consists of red patches covered with scaly scabs. These patches generally come on the face and form the shape of a butterfly, the body being over the mouth and a wing over each cheek.

*Treatment* usually employed is Finsen light, preceded by X-rays if there is ulceration. After treatment, apply a dressing of picric or boric ointment. Tubercular vaccine is sometimes injected. The patient should lead an outdoor life, sleep in a well-ventilated room, and have a plentiful fatty diet.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss May Long, Miss Jane Elliot, and Miss Kate Lewis.

### QUESTION FOR NEXT WEEK.

What measures would you adopt to check hæmorrhage from (a) the lungs (*hæmoptysis*); (b) a deep cut in the forearm; (c) a ruptured varicose vein?

## NINETEEN MILLIONS FOR THE RED CROSS.

Heartly congratulations to Sir Robert Hudson, G.B.E., Chairman of the Joint War Finance Committee of the Red Cross and Order of St. John of Jerusalem. During the five and a half years of war and its aftermath nearly nineteen million pounds was collected through his organization—upwards of sixteen millions having been acknowledged through press appeals—a proof of the colossal generosity of the British people and their sympathy with suffering.

## NURSING ECHOES.

Telegrams and letters are still reaching our office expressing delight at the passing of the Nursing Acts, the senders of which are eagerly awaiting information "How to Register." Next week we propose to take the Acts clause by clause, and explain simply their significance. Nothing further can be done until the General Nursing Councils are appointed, and they have met (as provided in each Act) to consult about the Rules for Registration. A term of two years' grace is provided for in the Acts, during which time nurses who are of good character, and who have been engaged in practice as nurses in attendance on the sick *under conditions which appear to the Council satisfactory*, for at least three years, may register. The Council must, therefore, satisfy itself of the character and qualifications of every nurse placed upon the State Register—a great responsibility, requiring an enormous amount of expert work. After the two years' term of grace, nurses desiring to register will be required to pass the State examination, as defined by the Council.

The registered nurses will, in the future, be under the jurisdiction of Nursing Councils, responsible in England to the Ministry of Health, in Scotland to the Board of Health, and in Ireland to the Council of Health; and these three Councils should keep in close touch with one another, so as to secure a uniform standard of qualifications in all parts of the United Kingdom.

We note that the Anti-Registration Press and its unprofessional critics are still attempting to delude nurses who waste money on it. Our advice to trained nurses is to rank up shoulder to shoulder, and build up their profession into the finest work for women under the sun.

The Panel of Emergency District Nurses for London has now been established, and a large number of nurses have applied to be enrolled. Particulars have been obtained, references taken up, and nurses applying interviewed by Miss Amy Hughes, one of the Honorary Secretaries of the Central Council for District Nursing in London, and twenty-six approved names have been entered on the Panel. District Nursing Organisations in London desirous of obtaining the services of a nurse, either for a short or long period, should apply to the Assistant Secretary to the Council (Miss Pollock), c/o the City Parochial Foundation, 3, Temple Gardens, E.C. 4.

The City of Westminster Union Infirmary at Hendon has been taken over by the Metropolitan Asylums Board, and will, in the future, be known as the Colindale Hospital. It is to be used for the treatment of tuberculosis cases. We hope, for the sake of the patients, Miss Elma Smith and her experienced staff will remain in charge of the Nursing Department. No doubt under the new Ministry of Health there will be more effective classification of disease, and by a system of reciprocity it should not be difficult to organise a curriculum of teaching for its nurses, which will provide them with practical experience in general, fever, communicable, and maternity cases, and thus give them a very thorough training preparatory to their Central Examination. We foresee all sorts of educational advantages for nurses in the future.

The Penal Reform League is authorised to give the following particulars of the new nursing scheme for prisons, the necessity for which it urged through a deputation to the Home Secretary in March last:—

The Commissioners have obtained authority of the Treasury for a Nursing Scheme in Prisons. As regards the male staff, the members of the hospital staff have generally had experience in the R.A.M.C., or in the Sick Berths of the Royal Navy. They, however, undergo special training in prison nursing at Parkhurst Prison, where there is a large hospital. On being passed as fit, they are posted for duty as nurses and receive additional pay. The intention is to have at least one such officer at every prison.

As regards the female staff, a special training school will be formed at Holloway Prison for instruction in nursing, under a Hospital Lady Superintendent of high qualifications and experience. Six months' training will be undergone, after which a further three months will be spent at the London Hospital. When finally reported as fit, the nurse will be appointed in that rank and will draw additional pay. It is the intention that there shall be at least one nurse at each female prison, and there will be a reserve at Holloway, for duty at any moment at any prison where emergency may arise, for nursing either male or female prisoners.

"We welcome," states the League, "this scheme as the beginning of better things in prison hospitals. But we cannot disguise our regret that so much of the training should be under prison conditions. The sick prisoners' needs are the same as those of any other patient, and the same skill is required to meet them. Moreover,

the nine months of training given under this scheme is just *one quarter* of the minimum demanded for qualification of a nurse. We hope the nursing societies will press upon the Commissioners the need for developing this scheme until we have a service of fully trained nurses in our prisons, not of wardresses with "a little knowledge."

We heartily endorse this expression of opinion, and have no doubt that as soon as safe and efficient nursing standards have been defined by the General Nursing Councils, that the Home Secretary will avail himself of the services of Registered Nurses to care for the sick in prisons. Only we must not imagine that general hospital training alone will suffice for this very special work. We look forward in addition to a course of very special instruction being available for those nurses who desire to qualify themselves for service amongst a class of patients who require peculiarly intuitive and sympathetic care upon the part of their attendants and nurses. Very picked women possessed of psychic force must be encouraged to labour in this environment—the average, wholesome, high-spirited animal is not enough.

Captain St. John, Hon. Secretary of the Penal Reform League, in a paper read before the Women's Institute, quotes from a report of the Medical Superintendent of the Chicago House of Correction—a model of its kind—as follows:—

"The proper care of prisoners, and the remedying of bodily defects through such treatment as modern surgery and medicine can give will decrease the prison population. There is not a day that we do not receive unfortunates who are compelled to beg or steal because of their inability to earn a living on account of some physical infirmity, which is readily cured by proper surgical or medical treatment.

The Chicago House of Correction to-day is looked upon by the police department, the judges, and part of the public, as a city emergency hospital and sanatorium for all the alcoholics, drug habitués, epileptics, chronic incurables, cripples, blind and helpless beggars, cranks, perverts, and general mental and moral defectives who require special medical and surgical care. Among the cases which have been sent to us as alcoholics, we have found unfortunates suffering from skull fractures, syphilis, softening of the brain, delirium of pneumonia, brain tumours, acute dementia, and other forms of insanity."

The Kingston-on-Thames Guardians have decided that the salary of the Matron to be appointed for the Infirmary is to commence at

£100 per annum, rising £10 yearly to a maximum of £140, with the usual war bonus.

We do not consider this salary sufficient for a Matron at an infirmary containing 600 beds, especially with the decrease in the value of money. Many mechanics make double the amount.

We are glad to note, however, that the Guardians are going to lessen the very excessive hours of work now in force for the nurses, upon the suggestion of Dr. Davies, the Medical Superintendent, who proposed that the present hours of day nurses should be reduced from 77 per week to 50½ hours, with one day's rest in seven, half-day on Sunday and two hours daily off duty on other days; and the night nurses' hours reduced from 80½ to 69 hours and one night off duty given each week. In order to carry out these proposals an additional staff of ten nurses will have to be employed.

Miss Sybil Drummond, of 69, Grosvenor Street, W., bequeathed £100 each to Nurse Duglinson, of Folkestone, Nurse Woosey, and Sister Parke, of Beaumont Street, W.

## SOCIETY FOR THE STATE REGISTRATION OF NURSES.

We hope there will be a great muster of members at the general meeting of the above Society, to be held on January 8th, at 11, Chandos Street, Cavendish Square, W., at 4 p.m.

Don't forget that the only object of the Society was to obtain an Act of Parliament for the Registration of Nurses, and that this great object has been attained.

## ARMY NURSING NOTES.

### VICTORY MEDAL RIBAND.

#### PRELIMINARY ISSUE TO BE MADE.

An Army Council Instruction just issued states that a preliminary issue of the Victory Medal Riband will now be made officially to those entitled to the medal. The riband will be issued to *personnel* still serving by commanding officers and heads of departments. Demobilised members of the nursing services should make individual application as follows:—

Members of Q.A.I.M.N.S.—To the Secretary, War Office (A.M.D.4), Cornwall House, Stamford Street, E.C. 1, giving particulars of service.

T.F. Nursing Members.—To the Secretary, War Office (T.V.4), 80, Pall Mall, S.W. 1.



## HONOURS FOR NURSES.

The King, on Wednesday, December 17th conferred decorations, at Buckingham Palace, as follows:—

### BAR TO THE ROYAL RED CROSS.

Miss Sarah Brown, Queen Alexandra's Imperial Military Nursing Service Reserve.

Miss Una Lee, Queen Alexandra's Imperial Military Nursing Service Reserve.

### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Lavinia Badger, Miss Ina Humfrey, Miss Louise Remnant, and Miss Kate Underwood.

*Territorial Force Nursing Service.*—Miss Pauline Barnard and Miss Isabel Eveleigh.

### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Joan Wells.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Lily Baldwin, Miss Mildred Beale, Miss Elizabeth Betts, Miss Charlotte Black, Miss Beatrice Brice, Miss Eileen Byrne, Miss Kathleen Cambridge, Miss Norah Connolly, Miss Mary Farmer, Miss Helen Fisher, Miss Margaret Griffith, Miss Beatrice Hall, Miss Elizabeth Lee, Miss Agnes Lithgow, Miss Christian Valentine, Miss Sara Wadsworth, Miss Jessie Warnock-Walker, Miss Mary Welch, and Miss Audrey Wellington.

*Territorial Force Nursing Service.*—Miss Alice Bunch, Miss Effie White, and Miss Nona White.

*Civil Nursing Service.*—Miss Helen Walters.

*British Red Cross Society.*—Miss Dorothy Sweet and Miss Joan Van de Weyer.

*St. John's Ambulance Brigade.*—Miss Kate Bradford and Miss Grace Broadhead.

*Voluntary Aid Detachment.*—Letitia, Mrs. Breese, Miss Margaret Gale, Miss Kathleen Grimbly, Harriet, Mrs. Llewellyn, Kate, Mrs. Talbot, and Miss Una Ward.

### FINAL HONOURS LIST. ROYAL RED CROSS (FIRST CLASS).

*Canadian Army Medical Corps.*—Miss A. G. Hogarth, A.R.R.C., Acting Matron, 16th Canadian General Hosp., Orpington, Kent; Miss B. A. Merriman, A.R.R.C., Nursing Sister, Assist. Matron, Canadian Red Cross Officers' Hosp., North Audley Street; Miss E. W. Odell, A.R.R.C., Nursing Sister.

*New Zealand Army Nursing Service.*—Miss S. L. Clark, Sister; Miss A. C. Ingles, A.R.R.C., Sister.

### THE MILITARY MEDAL.

Miss Lily Gregory, Voluntary Aid Detachment.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross and the Military Medal, subsequent to the Investiture at Buckingham Palace.

## PUBLIC HEALTH.

### INFLUENZA PRECAUTIONS.

The Ministry of Health has issued a Memorandum on the prevention of influenza, as it has been suggested that a recurrence may occur this winter; it is a revised edition of the document formerly issued by the Local Government Board. The Memo. advises that Nursing Associations should have plans ready in advance and Local Authorities are advised to take action along the following lines:—

1. The appointment of a small emergency committee (e.g., three members of the Public Health Committee) to whom, with the Medical Officer of Health, should be delegated full powers to act and incur necessary expenditure.

2. Medical practitioners and any voluntary health workers in the district to be consulted through their respective local organisations and their co-operation invited in determining the practical methods to be adopted.

3. A scheme as regards the provision of nursing and other assistance to families stricken with influenza to be formulated, such scheme to be carried out under the direction of the Medical Officer of Health.

4. Division of the town or district for this purpose into areas, to each of which one or more trained nurses are allotted for domiciliary nursing, the nurses to act in regard to individual patients solely under the direction of the medical practitioner in charge of the case.

5. Women to be enlisted as "home helps" to assist with cooking, care of children, and ordinary domestic work. Inquiries to be made to ascertain where such assistance is most urgently needed.

6. Utilisation to the best advantage of health visitors and other members of the staff of the authority and of institutions under the control of the council; improvisation of temporary crèches and of special kitchens in which food and invalid diet can be prepared.

7. Allocation to influenza patients of one or more wards in the isolation hospital or in some other available and suitable emergency hospital.

8. Issue of notices and leaflets to the public.

9. Prevention or mitigation of overcrowding, and securing adequate ventilation in public buildings or conveyances under the control of the council.

10. School closure may be specially useful in rural and smaller urban districts.

The Public Health Committee of the London County Council have authorised the payment, subject to the approval of the Minister of Health of a grant of £500 to the National Council for Combating Venereal Diseases, for lectures to trade and other large firms, school teachers, working women mothers, social workers, etc.; addresses, conferences, meetings, the distribution of free literature, and the exhibition of posters in connection with the treatment and diagnosis of venereal diseases. The expenditure will rank for the payment of the usual Government grant 75 per cent.

The Public Health Committee of the London County Council have also recommended additional grants to Westminster and St. Thomas's Hospitals for work in connection with the treatment of venereal disease.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION

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## THE PRESIDENT AND THE PROFESSION OF NURSING.

The President, Her Royal Highness, Princess Christian, has graciously consented to receive, on New Year's Day, representatives of the Executive Committee and of the Affiliated Societies of Nurses, to convey personally to Her Royal Highness their sincere appreciation of her kind message of congratulation to all members of the Profession of Nursing on the declaration of the Royal Assent to the Nurses' Registration Bills.

### A NEW YEAR'S GREETING.

We wish all Members of the Association and of the Societies affiliated to it a year of much prosperity. Such a greeting seems to-day to mean so much more than in the past, for the Acts for State Registration give to the nurses immense power, and we hope that each in her own place will use her opportunity to make the year 1920 the first in a long period of prosperity for the profession and its Members.

### COMMEMORATION BANNER.

A few of the younger Members of the R.B.N.A. have formed themselves into a small Committee and are arranging to commemorate the passage of the Acts for State Registration by providing their Association with a Banner. The details of its design have not yet been fully considered, but the suggestion at present is that a large reproduction of the beautiful badge of the Association should be the principal feature. The badge lends itself to such a purpose very well indeed. The crown in the centre will be worked mostly in gold, and the national emblems of the four countries, between the arms of the cross, will be embroidered in their natural colours. The colours of the cross itself will depend of course on the colour chosen for the banner. Below the badge the motto of the Corporation will be embroidered in crimson on a scroll of cloth of gold. The banner will be mounted with fringe cord and tassels, and the pole and cross-bar will have brass *fleurs de-lis* at their ends. The nurses propose to have the Banner made at the Royal School of Art Needlework, and,

when it is finished, it is their intention to ask Her Royal Highness the President whether she will be graciously pleased to summon and preside at a Special Meeting of the Council, and to accept the Banner in the name of the Corporation.

The Members who have interested themselves in the scheme are exceedingly anxious that the Banner shall be a very beautiful one, as they hope that it will remain the property of the Corporation for centuries. They consider that every Member will wish to have some share in giving it to her Association, as it is to commemorate the passage of a reform which the R.B.N.A. Members have helped so very much to bring about. The subscriptions need not be large, but if everyone will give a little we shall have no difficulty in getting the sum required to get the banner and to cover the expenses connected with the scheme of the nurses. They desire us to state that all the subscriptions towards it should be forwarded to Miss Grace Anderson, M.R.B.N.A., c/o the Secretary, Royal British Nurses' Association, 10, Orchard Street, Portman Square, W.1.

### ENGAGEMENT.

We learn with pleasure of the engagement of Miss Jean Morris to Mr. C. S. Murray, son of the late Lieut.-Colonel C. S. Murray, of the Seventy-second Highlanders. The marriage is to take place on 4th February from the home of the bride, "Melbourne," Gorsebrook Road, Wolverhampton. Miss Morris is one of the most popular Sisters at the Prince of Wales Hospital, Tottenham. She has always taken a great interest in all that concerns her profession, and we are glad to learn that she intends to continue her membership of the Association. Her fellow members unite in wishing her and Mr. Murray every happiness.

### THE R.R.C.

The inequality and unfairness in recommendations for the R.R.C. have long caused dissatisfaction in nursing circles, and the *Poor Law Officers' Journal*, in the following paragraph shows how social influence and pressure can be brought to bear in this connection. It reports:—

"Mr. W. C. Ridgwell, who presided over the last meeting of the West Ham Guardians, said he

was sure the Board would join him in congratulating the Matron and Sisters at the Infirmary who had gained decorations for war service. The Matron had the Royal Red Cross, and she had very generously said that it was given to the institution and not to her personally. This showed a very fine spirit. Eight nurses had gained the medal of the second class, and he thought much credit was due to Sir Arthur Stanley, who took the matter up. Mr. Ward, a member of the Board, too, had been hammering away at the Ministry and the local Members of Parliament, trying to get the services of these ladies recognised."

### QUEEN CHARLOTTE'S HOSPITAL.

Queen Charlotte's Hospital, Marylebone Road, N.W., the largest Maternity Hospital in England, is in very great need of help at the present time. During the past five years, owing to the great increase in prices, the income has been insufficient to meet the expenditure and a debt of £10,000 has accumulated. The applications for admission of patients have increased considerably; 2,000 poor women were admitted to the wards last year and over 2,000 have been attended and nursed in their own homes.

The extension and improvements about to be commenced when war broke out are urgently needed, quite £50,000 will be required.

The Committee earnestly appeal for generous support to enable them to cope with the ever-increasing demands on the help of the hospital.

### CORRESPONDENCE.

*To the Secretary R.B.N.A.*

DEAR MISS MACDONALD,—We are enclosing a small cheque which a few of your friends and well-wishers have collected as a little gift for you, and we would like you to buy a watch or a bicycle with it. As you will remember, some of the nurses started a plan last summer to give you a present, but you found it out and persuaded us to drop it. It was, as you will remember, with the greatest reluctance that we did give way, and those nurses who had already subscribed refused to have their money back. If you had only allowed us to go on we know the amount would have been fourfold, however it comes with all our expressions of gratitude and esteem for you and your work for the R.B.N.A. We did hope to have a little tea and present our gift, but time is so precious.

Please put our letter in the JOURNAL, because we wish the nurses to know what was done with the money, and that you had their gift at Christmas time. Also some among your friends have been vexed because they were not asked to give and we wish them to know that it was because one of us promised you that the matter would go no further. With all good wishes to you always,

Yours very sincerely,

ALICE CATTELL,  
CECILIA LIDDIATT.  
M. E. NASH.

### THE SECRETARY'S REPLY.

Dear Miss Cattell, Miss Liddiatt, Miss Nash, and Fellow Members,—Your gift has come as a great surprise to me, for, when last summer I played the part of Sherlock Holmes and drew correct deductions on observing a number of letters, addressed in familiar handwritings, passing through the office, and also certain conclaves in which I had not part, I imagined that my Scottish persistence and capacity for argument would, and subsequently had, prevailed upon you to discard your very kind and very generous scheme. Please believe me when I say that the position I took in regard to this was not due to any lack of appreciation of your kindness nor, in any sense, to ingratitude. On the contrary you can never know how deeply I have valued your kind thought and your obvious reluctance to give way to my scruples. Those scruples were, however, very real ones, for no one knows better than I what the struggle of the past few years has cost the Association and the nurses. It has been no easy thing for them to fight their battle for the right on their earnings, against those who have held unlimited control over large sums of money, in pushing forward their unjust claims for preferential treatment from the State. Moreover, I know full well how generously and wholeheartedly the R.B.N.A. nurses respond to any appeal, whether it may reach them on behalf of their Profession, their Association, or one or other of their Benevolent Schemes. Again, as I told you in the summer, we have been such "good comrades" in the struggle of the last few years; everyone has done her part in her own place, and it really made me feel ashamed that I should be singled out in any way for recognition. Besides, there are others who have done so very much more than I.

I think I shall have the bicycle, because I always get such utter and unmixed pleasure out of a wheel, and so the R.B.N.A. Nurses will always be in my thoughts in my happiest hours; and with me, at those times, will be the memory of the days when we fought together through these last long heavy months of the battle for a just Registration Act for the nurses. I thank you all for your gift and for the love and kindness and friendship that make it such a pleasure at all times to work among you and for you.

With every good wish and again heartfelt thanks.

Believe me,

Very sincerely yours,  
ISABEL MACDONALD.

### NOTICE TO MEMBERS.

We beg to return our sincere thanks for all the letters and telegrams of congratulation which have reached the office in connection with the passage of the Acts for the State Registration of Nurses.

ISABEL MACDONALD,  
*Secretary to the Corporation.*

10, Orchard Street, W.



**HEALTH WEEK, MAY 2nd-8th, 1920.**

From the Royal Sanitary Institute we are informed that the Right Hon. the Lord Mayor of London has consented to act as Chairman of the General Committee promoting Health Week, to be held from May 2nd to May 8th, 1920.

**No. 1 BILL NOT WITHDRAWN.**

Bill (No. 1) for the State Registration of Nurses, promoted by the Central Committee, remained on the Orders of the Day in the House of Commons, until the Prorogation of Parliament, when it vanished with the Session. Major Barnett never withdrew his Bill realising the vicissitudes of politics, but he gave whole-hearted support to the Government measure, promoted, as promised, by the Minister of Health, and had the satisfaction and pleasure of seeing the principles incorporated in his Bill receive the support of Parliament and pass into law; a highly satisfactory conclusion to the Nurses' Registration controversy, and one which should inspire the whole nursing profession with a determination to make the very best use of the Nursing Acts in a spirit of harmony and goodwill.

**THE COLLEGE OPPOSES TRADE UNIONISM FOR NURSES.**

At a social gathering of members of the College of Nursing, Ltd., recently held at Leeds, Miss Cowlin, the Organising Secretary, attacked trade unionism as a means of nursing organisation, and the following resolution was passed, and it was resolved to send it to the Minister of Health:—

"That in the opinion of the meeting a professional union of nurses registered under the Trades Union Act is not an ideal unit of organisation, and that the Ministry of Health be urged to do all in their power to improve the salaries and conditions of trained nurses, that with the co-operation of the Ministry voluntary professional organisation may prove to be the best medium for obtaining a high standard of nursing service."

It would have been interesting to have seen Dr. Addison's expressive face when he read this ingenuous communication! It is a great pity the College advocates know so little of politics, and behave in so childish a manner. Why kick against the pricks?

Trade unionism has the power of the Law behind it, and if individual nurses elect to use that power, what right has the College to send paid agitators around the country to misinform nurses on the question? And, by the bye, who pays these runners? Surely money collected from the charitable public by the heart-rending and pauperising appeals of the Nation's Fund for Nurses for poor, down-trodden, over-worked and sick nurses, and for academic schemes, is not used in support of this political propaganda! No doubt kindly trades unionists have subscribed amongst others to this so-called National Fund, and it would be the irony of Fate to take their money for any such purpose.

**APPOINTMENTS.****MATRON.**

**Worcester General Infirmary.**—Miss M. F. Watson has been appointed Matron. She was trained at Bolton General Infirmary and has been Sister-in-Charge at Monsall Fever Hospital and Worcester General Infirmary, where she has also held the position of Night Superintendent, Assistant Matron and Acting Matron.

**Compton Bishop Children's Home.**—Miss Ethel G. Banfield has been appointed Matron. She was trained at St. Bartholomew's Hospital and has held the positions of Assistant Matron, St. Bartholomew's Hospital Convalescent Home, Swanley; Assistant Matron, St. George's Hospital, Malta; and Matron of St. Ignatius Hospital and of Valetta Hospital, Malta.

**SUPERINTENDENT NURSE.**

**Edmonton Union.**—Miss Jane Cowen has been appointed Superintendent Nurse. She was trained at Stockport Infirmary and has been Superintendent Nurse at Stepney and head nurse at Biggleswade Union Infirmary.

**ASSISTANT SUPERINTENDENT**

**Manchester, Child Welfare Centre.**—Miss Jessie Emsley has been appointed Assistant Superintendent. She received her training at the Liverpool Royal Infirmary, and has since been Sister at the East Suffolk Hospital, Ipswich, at the Beckett Hospital, Barnsley, and at the Stanley Hospital, Liverpool. Miss Emsley has also seen service in France with the St. John Ambulance Brigade Hospital, and with Queen Alexandra's Royal Naval Nursing Service Reserve at Plymouth. She is a certified midwife.

**SISTER.**

**Taunton and Somerset Hospital, Taunton.**—Miss Elizabeth Rogers, R.R.C., whose appointment as Sister at the Taunton and Somerset Hospital we reported last week, was trained at the Royal Infirmary, Chester, not as stated at the General Infirmary, Worcester, in which institution she held the position of Sister.

**HEALTH VISITOR.**

**Monmouthshire Education Committee.**—The following trained nurses have been appointed Health Visitors: Miss O. B. Bishop, Miss G. P. Kennedy, and Miss E. M. Owen, trained at King Edward VII. Hospital, Cardiff; Miss C. Davies and Miss M. M. Gale, trained at the Royal Gwent Hospital, Newport, Mon.

**QUEEN ALEXANDRA'S MILITARY NURSING SERVICE FOR INDIA.**

The following promotions have been made:—

**LADY SUPT. TO BE CHIEF LADY SUPT.**—Miss H. A. M. Rait, R.R.C. (Sept. 18th, 1917).

**SEN. NURSING SISTERS TO BE LADY SUPTS.**—Miss H. J. Reynolds (Sept. 18th, 1917); Miss A. M. Harris, R.R.C. (Jan. 10); Miss M. E. Harvey (March 30th).

**NURSING SISTERS TO BE SEN. NURSING SISTERS.**—Miss A. Goodwyn (Sept. 18th, 1917); Miss S. G. Mills (Jan. 10th); Miss L. A. White, A.R.R.C. (Feb. 17th); Miss W. M. Aldridge, A.R.R.C. (March 30th).

The following ladies have been appointed Nursing Sisters:—Miss E. M. McPherson (Nov. 15th, 1918); Miss E. F. Grove (Feb. 27th).

The following lady nurses have been permitted to resign the service:—Sen. Nursing Sister Miss E. J. Reid (July 17th). Nursing Sisters.—Miss E. Lawson Brown (Sept. 1st, 1918); Miss V. R. Tyler Cove (Oct. 1st, 1918); Miss C. H. Shaw (Jan. 16th); Miss D. A.

Porter (May 1st); Miss L. Locke (June 1st); Miss L. Allman (Oct. 15th).

The following ladies have been permitted to retire from the service:—Lady Supt. Miss C. L. Cusins (March 1st, 1918); Lady Supt. Miss C. F. Hill (Jan. 10th); Sen. Nursing Sister Miss E. Sykes (Feb. 7th).

### OUR SISTERS OVERSEAS.

As soon as the King's Assent was given to our Nursing Acts, a cable was sent to Miss Lavinia L. Dock, Hon. Secretary of the International Council of Nurses, at Fayetteville, U.S.A., to which she cabled a reply rejoicing with us. No woman in the world has taken a deeper and more sympathetic interest in the struggle for legal status for her sex, and for her colleagues, than the brilliant part authoress of "A History of Nursing." The nurses throughout the world owe her much, and she is held in the warmest affection and admiration by all who come into personal relations with her.

The *American Journal of Nursing* has been compelled, owing to the increased cost of production, to raise its price to two dollars, fifty cents for twelve issues—about tenpence a copy—it is very well worth it.

The *Journal* announces handsome donations from American nurses and their friends for the Memorial Fund for the Nightingale School at Bordeaux, in honour of all nurses who have given their lives in active war service.

As soon as THE BRITISH JOURNAL OF NURSING reached Bordeaux containing the glad news of the King's Assent to the Nursing Acts, the following message flew over the wires: "*Très sincères congratulations.* Hamilton et Mignot."

### A LOSS TO NURSING IN ITALY.

The death of Princess Doria at Rome is a very severe blow to the evolution of trained nursing in Italy. The Princess, who was a sister of the Duke of Newcastle, was married to an Italian Prince, and has long taken a most sympathetic personal interest in the Scuola Convitto Regina Elena at Rome, at which Italian nurses are trained on English methods, under the superintendence of Miss Dorothy Snell. Owing to numerous reasons, the work is difficult, but is now very successful; but the death of one of its most intelligent and devoted supporters is an irreparable loss, and we offer our sincere sympathy to our Italian colleagues.

Miss Snell, who was enjoying a short holiday in England, and through whom we keep in touch with nursing in Italy, writes: "Alas! Princess Doria is dead! and I am going back to Italy at once. I have no heart to enjoy anything in the world. The Princess's loss is unspeakable; the cause she had at heart is doubly sacred now the dear Princess has left us, and more than ever it is a matter of honour to do all she would have wished."

### BOOK OF THE WEEK.

#### "THE HISTORY OF THE SCOTTISH WOMEN'S HOSPITAL."\*

Stranger and more deeply interesting than any fiction is this record of the wonderful work of strong and purposeful women from the first months of the war until its close.

The import of the book needs no explanation, as the work of the Scottish Women's Unit is of world-wide knowledge. It is dedicated to the memory of Dr. Elsie Maud Inglis, "living now under wider skies than ours, the record of work done by the women she helped to organise and lead."

The story told is given almost entirely in the words of the women who did the work.

"With the exception of the first four months the Scottish women worked for the Serbian nation during the whole war; with them they grappled with the dread typhus and overcame it. They accompanied them in the great Retreat, they followed them fighting through the Moglena Mountains; they strained to keep up with their victorious armies over crest after crest in the breathless rush to Prilep." The story of the long, peaceful summer between the storms of the typhus epidemic and the invasion by the enemy is told in Dr. Inglis' own words, and shows how the practical side of the work was carried out without regard to personal comfort or convenience.

She is speaking of taking over a Serbian hospital at Lazarovatz. "Getting the courtyard in order has been most exciting work. The cesspool they admit has not been emptied for four years. I think it is more like ten. We have been at it for five mortal weeks."

"I watched them (the Austrian prisoners) at work for about ten minutes, and then I descended on them. I stood over them for about two hours, and I don't think these Austrians can have worked so hard since they came to Serbia!"

Or again when fifty extra sick were unexpectedly coming down the line. "We went and turned out a gast house, people who had been sitting there in the gast house helping to clear out the tables and chairs. We swept the whole place to the light of storm lanterns, got on some boiling water in the little kitchen place, and then down on us came the patients, bed and bedding together. There was no question of bathing. We just tore off their uniforms and their heavy muddy boots." With the pictures of Dr. Inglis before us we can imagine her tackling these practical problems with equal zest as in her own highly technical work.

The story of the Great Retreat and its tragic experiences is told by Mr. Smith and illustrated with wonderful drawings by his pencil. After unparalleled difficulties and hardships—"At last we reached our camping-ground, and we set about preparing supper. Trees had been felled, and fires burning everywhere and the scene amidst the

\* By Eva Shaw McLaren. Hodder & Stoughton, London.

snow was unforgettable. A party of peasants invited us to their roaring fire, and we shared what supper we had with them. We sat round the camp fire and though roasted in front and frozen behind, we managed to get a few hours' sleep. We took the road at dawn. It was snowing hard and perishingly cold. We were now far into the Pass, and there could be no turning back." The Albanian peasants helped with the horses. "One would take the pony's head and the other the tail, and all three would then slide and slither down the icy descent in the cleverest fashion. Our only thoughts were of food, and our talk was of food, and to recall any delicacy would bring our hearts to our mouths." Seven weeks of this terrible flight before the party arrived at Brindisi.

We must conclude this notice with an extract from the chapter entitled "Our Chief," in which Elsie Inglis is compared with Florence Nightingale.

"To both the service of man was part of their creed, which gave richness to their service of God.

"Both believed in the absolute duty of 'following the gleam' that shone on their path in life whatever might be the apparent obstacles. Difficulties to them were only so many stones to be stepped pleasantly over if possible, or otherwise sternly cast aside.

"It was with girt loin and lamp lit that August, 1914, found Elsie Inglis. For three years her great nature was to be privileged to do a work exacting its full powers, demanding the uttermost of her strength even to the last breath of her gallant spirit as it winged its way to the higher sphere."

It is indeed an inspiring record, and one which should make British women glow with pride.

The illustrations are profuse and of great interest, and include portraits of the brilliant medical women who served the Unit. The panoramic view of the Hospital in Salonica is a fine illustration and gives the reader some idea of the immense scope of work planned and organised by these women.

Though we have commented chiefly on the portion of the book dealing with Serbia, our readers are aware that the Scottish women established hospitals in Calais, Royaumont, Salonica, Corsica, Troyes, Vranja, Russia, Ostrovo and Sallanches. Such an immense undertaking, carried out triumphantly to its conclusion, is a lasting witness to the wit and wisdom of women.

H. H.

## A KINGLY GRAVE IN FRANCE.

Under the title "A Kingly Grave in France," Messrs. Longmans, Green & Co., 39, Paternoster Row, London, have published an interesting booklet by the author of "Especially" and "The Cup of War." Let us explain the reason for it in the author's own words.

"At last I have had my wish. I have seen with my own eyes the spot where our son fought

his last fight and 'laid him down with a will.' Many and many a mother has longed to make this pilgrimage to France; many would gladly go on foot if only they might reach their sacred spot. For those who cannot go, I will try to tell how it fared with me."

This much-loved son "went out to France a subaltern of twenty-five with six years' service in one of our best infantry regiments. Before he was twenty-eight he was Lieutenant-Colonel, D.S.O. and M.C." He was mortally wounded on May 27th, 1918, and fourteen months elapsed before his mother was able to visit his grave. The information she gives as to the details of her journey would be valuable to other relatives making the same sad pilgrimage. At length she writes:—

"There beside his trench, facing the miles of open country, alone with God and with the birds and flowers and butterflies all about his bed—there lay our only son, the joy of our life, the pride of our hearts, but, oh! never prouder, *never* prouder, beloved, than now. . . . The mothers of those who lie in Kingly Graves have no call to weep. But for our sons, what happiness had there been to-day in England?

"Now, when the moon shines into my room, I can picture just how quietly it shines above the little wooden cross and ivory Christ.

"The cornflowers will fade, the piteous trenches crumble gradually away, but that wide and starry sky, that majesty of silent peace will still be there. In the morning and the evening I shall see it, in the rain and in the sunshine, but I will never wish it different.

"If the souls of our glorious dead are sleeping for awhile, where better could they sleep? If only their gallant bodies lie under the flowers, then their spirits have long since answered to the Roll Call of Paradise. Rank after rank the regiments have mustered in the Courts of God, for once more the cry of the Crucified has gone forth to the sons of men: 'Are ye able to drink of the cup that I shall drink of?' And they have said unto Him: 'We are able.'"

## OUTSIDE THE GATES.

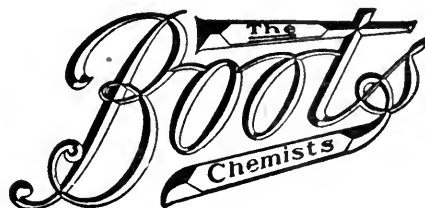
The passage into law of the Sex Disqualification (Removal) Act has made it necessary for the Lord Chancellor to reach a decision as to what (if any) immediate steps should be taken by him in view of the new statutory qualification enabling women to be placed upon the Commission of the Peace.

The Lord Chancellor has therefore formed a committee, consisting of Lady Crewe, Lady Londonderry, Mrs. Lloyd George, Miss Haldane, Miss Tuckwell, Mrs. Humphry Ward, and Mrs. Sidney Webb, to advise him respecting the appointment of women magistrates.

The members of the Committee will at once be placed upon the Commission of the Peace.



# A Reliable Dispensing Service.



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## A LEGEND OF SANTA CLAUS FOR 1919.

When some of us were younger wights  
By thirty years and more,  
We hung our stockings out those nights  
When legend said, between the lights  
Saint Noel passed the door!

From endless lengths of wool and thread  
We spun all day, and oft  
When night was purpling overhead  
To get those hosen perfected,  
Some rough, some fleecy soft!

Some were strong-knit, for hustling feet  
To scale big heights, and some  
Would speed along the sordid street  
Where sun and joy so seldom meet,  
And fairies never come.

And as we hung our stockings out  
Hope in each heart flamed high,  
We never had a single doubt  
The friendly Saint would search about  
For us as he went by!

But many Yuletides came and sped  
Tho' still to Hope we clung;  
Good Nicholas just past us fled,  
And shunned the foot of any bed  
Where our poor stockings hung!

Custom lives on like Persian laws!  
A month of years all told  
We wondered still if Santa Claus  
Beside our doors would ever pause  
Or pass them as of old?

When Hope was nearly out of sight  
And Patience stood at bay,  
We reached the point, so short of light,  
The gruesome, blackest hour of night  
Close to the dawn of day!

When, lo! to one who vigil kept  
The Birthday watch to share,  
Silent—to waken none who slept—  
A sudden vision forward stepped  
And Santa Claus was there!

He took each stocking from its post  
And filled it to the brim;  
'Twas Father Noel's kindly boast,  
He'd brought us all we wanted most,  
Who'd watched so long for him.

"How looked he ere he vanished,  
And did you hear his voice?"  
"A veil was wrapped about his head,  
But 'twas no old man's voice which said  
'Daughter of Mine, Rejoice.'"

C. B. M.

December 25th, 1919.

## COMING EVENTS.

January 3rd.—Irish Nurses' Association Meeting,  
34, St. Stephen's Green, Dublin. 8 p.m.

January 8th.—Society for the State Registration  
of Trained Nurses. General Meeting of Members,  
11, Chandos Street, Cavendish Square, London, W.  
4 p.m.

## A WORD FOR THE WEEK.

Every soldier has a share in the honour of the  
victory.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon  
all subjects for these columns, we wish it to be  
distinctly understood that we do not in ANY WAY  
hold ourselves responsible for the opinions expressed  
by our correspondents.*

## SEEN FROM THE CRIMSON BENCHES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I read Miss Kent's delightful  
article with very great pleasure in last week's  
Journal, and agree with her that we have reason  
to be proud of the traditions of the "People's  
House," but as one of those nurses permitted to  
sit upon the "Crimson Benches" on the floor  
of the House of Lords, on the historic occasion  
when the King's Assent was given to the Nursing  
Acts, I claim we have an equal right to be proud of  
the House of Lords; and having from this most  
honourable coign of vantage been privileged to  
witness the Prorogation of Parliament by Royal  
Commission—a most beautiful and imposing  
ceremony, I hope it may be many a long day  
before this fine symbolism in our Parliamentary  
procedure is disregarded.

It was with silent satisfaction I noted the  
glistening "bauble" (the mace) borne before the  
Lord Chancellor, when accompanied by the four  
Royal Commissioners, wearing their gorgeous  
scarlet ermine trimmed robes, they entered the  
House and seated themselves upon a bench before  
the uncovered Throne.

Then the interesting pageant began. The Lord  
Chancellor, young, handsome and dignified, directed  
the Yeoman Usher, Captain Sir T. D. Butler,  
to summon the "faithful Commons" to the Bar  
of the House of Lords to hear the Royal Commis-  
sion read. The feat of walking backwards for  
the whole length of the House, bowing three times  
to the Throne, was faultlessly performed by this  
representative of Black Rod, and we waited in  
silence until, in response to the summons, the  
Speaker attended by the Sergeant-at-Arms,  
together with Mr. Bonar Law and other members  
of the House of Commons (amongst them Lady  
Astor) appeared at the Bar.

When the Lord Chancellor addressed those  
present as "My Lords and Members of the House  
of Commons," instead of in the form used for  
centuries as "My Lords and Gentlemen of the  
House of Commons," we realised a significant  
alteration in the phraseology, made to include  
women as Members of Parliament.

The Royal Commission was then read and the  
Royal Assent given to forty-five Bills, one Clerk  
at the table reading the name of the Bill, the  
other exclaiming "Le Roy le Veult," both then  
turning and bowing with the utmost ceremony  
to the Throne.

Bill after Bill was assented to, and then—never  
to be forgotten moment—we heard those named  
for which we had been anxiously waiting—The  
Nurses' Registration Bill. "Le Roy le Veult!"

The Nurses' Registration (Scotland) Bill. "Le Roy le Veult"—The Nurses' Registration (Ireland) Bill. "Le Roy le Veult."

All the nurses present appeared absolutely motionless yet deeply moved.

It was an experience in suppressed emotion I shall never forget.

When again I realised my surroundings, the Lord Chancellor was reading the King's Speech in his beautiful voice—a hopeful and spirited Speech, recording great national events and paternal pride.

Then Parliament was prorogued, and the Lord Chancellor preceded once more by that glistening "bauble," passed with a swinging stride, yet dignified withal, "the seats of the mighty" from which the honoured nurses had risen, and were standing at attention.

Then bubbling over with joy we left the Lordly Chamber to find in the lobbies a host of congratulatory friends, and thus into Parliament Square, where, if I am not mistaken, two of our number (and seniors at that) jazzed lightly past the sombre statue of Cromwell, to his evident consternation.

"ONE OF THE OLD GUARD."

#### REGISTER OF EMERGENCY NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—You were good enough to insert a paragraph in your reading matter, drawing attention to the advertisement which appeared in four numbers of your JOURNAL in regard to the establishment of a Register of Emergency Nurses. So large a number of applications have been received that the Executive Committee of the Central Nursing Council, at their Meeting yesterday, asked me to send a further paragraph in the hope that you would be good enough to insert it or something similar, so that the Nursing Associations of London might be fully acquainted with the facilities now provided for them.

I remain,

Yours truly,

ZOE C. PUXLEY,

Joint Hon. Secretary,

Central Council for District Nursing in London.

[We have pleasure in drawing attention to this excellent scheme—the Panel of Emergency District Nurses for London—on page 3 of this week's issue.—ED.]

#### MEMORIES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—Christmas dawns again! and the very fact brings to memory the many kind, encouraging words you never failed to send us when we were far separated from the warmth and pleasures of the Christmas hearth at home. We always felt we were thought of and provided for. Now I just send these few lines to wish you a happy Christmas and much prosperity in the coming year; let us hope it will bring peace among men and that these dreadful times may right themselves and see an end to all these hapless conflicts and uprisings.

Just now my heart is full of memories of the simple, happy, self-made little Christmases spent with my dear soldiers, and how they helped to arrange and plan little things, as much as they were bodily able, to brighten their surroundings, and thus enable them to dispel for the moment the thoughts of the sad and revolting scenes already taking place within close reach of our little unfortified quarters.

With renewed good wishes,

Very sincerely yours,

L. CHARLOTTE MAIZE

(Former Nursing Sister F.F.N.C.)

King's Hospital,

Blackhall Place, Dublin.

#### KERNELS FROM CORRESPONDENCE.

##### THE NURSING ACTS.

C. B. M.—"Your telegram to hand. God Save the King. I hope a Thanksgiving Service is being arranged. *Avec esprit on arrive à tout.*"

Sister Mary Tower.—"The greatest victory of Right over Might working women have won off their own bat. . . . Politics are not so degenerate after all."

Citizen Nurse.—"We devoured the B.J.N. Dr. Addison and Major Barnett will not lack women canvassers at the next election if gratitude means anything to the Nursing Profession."

Nurse Mary Lang.—"The best Christmas ever."

Sister Eleanor.—"Got the good news on Christmas Eve. Couldn't sleep for excitement. Suppose it is not etiquette to thank the King. How I should have loved to have been in the House of Lords to hear His Will expressed on our affairs. What a thrilling moment."

Member of Another League.—"To think that this splendid work has been done for us—and our League has taken no part in it! I envy the members of the Bart's League, who have shown such an admirable public spirit. They deserve the honour which devolves upon their school in connection with State Registration, as pointed out by Mrs. Andrews at the recent League meeting: (1) That a Matron initiated the reform; and (2) a one-time medical student, as Health Minister, introduced legislation and placed the Nursing Acts on the Statute Book, and (3) the Treasurer of Bart's carried them through the House of Lords—an extraordinary coincidence. It is a lesson to Nurses' Leagues not to shirk responsibility, as so many of them have done—ours amongst them."

#### OUR PRIZE COMPETITIONS.

January 3rd.—What measures would you adopt to check hæmorrhage from (a) The lungs (hæmoptysis), (b) a deep cut in the forearm, (c) a ruptured varicose vein?

January 10th.—What nursing treatment and management are required for a case of infantile wasting?

# The Midwife.

## ENGLISH MIDWIVES IN THREE CENTURIES.\*

*Abridged.*

By M. OLIVE HAYDON.

*Superintendent of Paget House Midwifery Training School.*

"The lives of the Queens of England," by Agnes Strickland, in six volumes, gives many picturesque details of the doings, manners, costumes and sayings of queens-consort, queens-regnant and queens-dowager. It is chiefly from these books and from Aveling's "English Midwives" that one can gather information about midwives in English history.

### MARGARET COBBE—A FRIEND IN NEED.

The first royal midwife mentioned in the old records is Margaret Cobbe, who attended Queen Elizabeth Woodville, wife of Edward IV, at the birth of Edward, the elder of the little princes murdered in the Tower. He was born in a strong, gloomy building called the Sanctuary, at a short distance from Westminster Palace, to which his mother had fled in panic; his father was waging war on Warwick, who was the partisan of Henry IV.

The Queen registered herself, her three daughters and Lady Scrofe as sanctuary women. She was destitute of every necessity for her confinement, but the Abbot of Westminster "sent various conveniences" from the Abbey close by, and "Mother Cobbe, a well-disposed midwife, charitably assisted the distressed queen in the hour of maternal peril and acted as nurse to the little prince," the much-hoped-for heir. When the rebellion was over Edward IV bestowed princely rewards on the "humble friends" who had aided his Elizabeth, as he calls her, in that fearful crisis. He pensioned Margaret Cobbe with £12 per annum.

### WHEN MIDWIVES WERE WELL PAID.

In the privy-purse expenses of Elizabeth of York, wife of Henry VII, is found an entry of £10 paid to Alice Massey, the queen's midwife, for the exercise of her office.

She was difficult to please in her choice of a midwife. She conferred first with a French nurse, but dismissed her with a gratuity of 6s. 8d.; the queen's niece then recommended a Mistress Harcourt, but she likewise was dismissed with the same sum. Perhaps her final choice was none too wise, for she developed serious symptoms on the seventh day after her confinement, and died on the ninth.

### A DRAMATIC INCIDENT.

At the birth of the first born of Henrietta Maria and Charles I, a dramatic incident took place. Labour set in prematurely while the queen was at Greenwich, with neither physician nor midwife to attend her.

The "good old woman" called in was so agitated and perturbed that she swooned, and had to be carried out of the royal chamber. The French "sage-femme" chosen by the queen's mother had been captured en route by a privateer; there is a record of £100 given to one Alice Dennis for her services on this occasion.

During the Civil Wars a petition was presented to Parliament by midwives. They made "just complaint" of the loss of their living that the war entailed. They stated they "were formerly well paid and highly respected in the parishes for their great skill and midnight industry." The Chamberlens, re-inventors of the forceps, would not have agreed as to the great "skill." They agitated for improvements in the practice of midwifery, and one of them tried to provide for the instruction of midwives, "the uncontrolled femal arbiters of life and death."

### THE FIRST TEXT-BOOKS OF MIDWIFERY.

In 1665 Hugh Chamberlen published a book on midwifery for the instruction of midwives; and in a book, "The County Midwife's Opusculum," Willoughby writes of midwives: "They will leave nothing unattempted to save their credits and cloak their ignorances. . . . When ye meanest of ye women, not knowing how other wise to live, for the getting of a shilling or two to sustain their necessities, become ignorant midwives, their travailing women suffer tortures." His own daughter was a midwife, and a quaint story is told of how she diagnosed a breech presentation, but longed to have it confirmed. Her father, dressed in women's clothes, was smuggled into the darkened room, but he maintained, after an examination, which the patient imagined was made by his daughter, that the head presented. He was evidently less experienced than she, for the course of events proved him wrong.

The first book by an English midwife, Mrs. Jane Sharp, appeared in the seventeenth century. She wrote much common sense on cleanliness, fitting surroundings, temperance and occupation for the expectant mother.

One other midwife's name has come down to us—Elizabeth Cellier, who was arraigned for high treason, and put in the pillory for libel. She laid a plan whereby all the midwives in London were to be united in one college before James II, but it fell through.

### THREE CENTURIES PASSED—ANOTHER UNDER WEIGH.

After the sixteenth century, the monopoly of the practice of midwifery by untrained women ceased. We can look forward to yet better things in the twentieth century; perhaps Elizabeth Cellier's idea of a college of midwifery may be realised; be that as it may, better and longer education will doubtless be insisted upon for those who follow what is so quaintly called "the midnight industry."

\*From "Maternity and Child Welfare."

# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### CRUSADERS' DAY.

#### A LEAGUE OF YOUTH AND SOCIAL PROGRESS.

The world to-day is for the young, and the latest League is the League of Youth and Social Progress, which aims at including the young manhood and young womanhood of the Nation, whatever their religious or political opinions, their class or sex. Its central office is at 4, Temple Gardens, on the site where Crusaders lived in bygone days, and the proposal to observe the first Sunday in the New Year as Crusaders' Day in churches and chapels of the country received the warm approval of the Prime Minister, who urges the members of the League "to go forth as men imbued with the spirit of the Crusaders."

The founder of the League, which aims at creating a new social Order on the basis of fellowship, justice, freedom and peace, is Mr. J. Aubrey Rees, and the ten points through which it hopes to unite men and women of good will in a national fellowship, and to inspire them with a vitalised social consciousness, are as follows:—

#### THE TEN POINTS OF THE LEAGUE.

"1. That love and not hate is the fundamental truth on which hangs the well-being of the world, and that reliance on brute-force is incompatible with the highest social good.

"2. That human nature, under whatever garb, is at heart sound and good.

"3. That all men and women can be encouraged to pursue unselfish ends, and that it is a finer thing to love one's fellowmen and to seek to bring beauty and happiness in human lives than to love one's possessions or to harness one's sympathies.

"4. That extravagance, sloth, waste and

selfishness are sins against the Commonwealth, embittering human relationship, intensifying the spirit of hatred and prolonging national discord.

"5. That the mass of people have not had the opportunity for self-expression or of participating in the richness of life.

"6. That bleak and solitary lives, squalid surroundings and monotonous toil, generate industrial unrest, social antagonism and national insecurity.

"7. That barbed-wire entanglements of prejudice or custom must be removed if they impede the attainment of justice or freedom.

"8. That sacrifice and service are demanded from all citizens, but that the higher the position and the greater the wealth, the larger the measure of sacrifice and service demanded.

"9. That the privilege to generate joy is not bounded by the frontiers of one's own family or one's own class.

"10. That, given the vision to see, the faith to believe, the will to endure, and the courage to act, the unconquerable spirit of man can, in response to the call of the Divine Spirit, begin to build here and now the City of God."

On Sunday last the Lord Mayor of London attended in state the afternoon service at St. Paul's Cathedral, when the sermon was preached by Archdeacon Holmes, and other well-known clergy and ministers also preached during the day on the ideals of the League.

Its ideals are admirable, and it is proposed to carry them out through the medium of three National Councils, educational, reconstructional and political. The political Council, which consists of young Members of Parliament, will promote the ideals of the League through legislative channels. We shall watch with much interest the development of the League, which, if it fulfils the hopes of its promoters, may become a great force for good.

## OUR PRIZE COMPETITION.

WHAT MEASURES WOULD YOU ADOPT TO CHECK HÆMORRHAGE FROM (a) THE LUNGS (HÆMOPTYSIS) (b) A DEEP CUT IN THE FOREARM, (c) A RUPTURED VARICOSE VEIN?

We have pleasure in awarding the prize this week to Miss Rose Ellen S. Cox, The Bungalow, Park Road, Monton, near Manchester.

### PRIZE PAPER.

In all cases of severe hæmorrhage a nurse should send at once for medical assistance, in the meantime using what means she has at hand to check the bleeding.

(a) *Hæmoptysis*, or hæmorrhage from the lungs, is recognised by its bright red and frothy appearance, and it is usually coughed up in mouthfuls.

*Treatment*.—Lay the patient in a recumbent position, with the head and shoulders slightly raised and the head turned to one side, loosen all clothing about the chest, open the window and door to allow a current of air through the room. If ice is procurable, place an ice-bag (covered with a piece of flannel) on the chest and give the patient small pieces of ice to suck. If ice is not available, cloths wrung out of cold water may be applied to the chest and changed frequently. Small sips of vinegar and water may be given, or the patient may be allowed to suck a lump of sugar on which a few drops of turpentine have been sprinkled. He must be kept very quiet and not allowed to talk or exert himself in any way. No alcoholic stimulants must be given, but if faintness comes on apply smelling salts to the nostrils, and hot bottles (wrapped in flannel) to the extremities. A little cold strong coffee may be given if the shock is very severe. For a few days after the attack the patient must be kept on fluid nourishment, which should not be hot, only warm.

(b) *Deep cut in the Forearm*.—Hæmorrhage from a deep cut in the forearm may be arterial or venous, and will be distinguished by its colour, arterial blood being bright scarlet and coming in spurts corresponding to the heart-beat. Venous blood is recognised by its purplish colour and its steady continuous flow.

If the bleeding be from an artery the wound should be covered with a piece of clean lint and digital pressure applied to the Brachial Artery, pressing firmly downwards and backwards against the humerus, in the middle of the arm, after first elevating and extending the limb. If this does not arrest the bleeding, compression by forcible flexion must be used. This is done by placing a hard pad in the bend

of the elbow and flexing the forearm over the arm and keeping it firm by means of a bandage. This is rather uncomfortable for the patient, therefore he should never be left alone or he may become restless and displace the pad, which would cause the bleeding to recommence.

If the bleeding be from a vein, pressure should be applied at a point farthest from the heart. Also directly over the wound by means of a graduated compress. This is made by cutting several pieces of lint in graduated sizes, the first one being cut just the size of the wound, each layer slightly larger than the others. The compress should be soaked in some antiseptic and firmly bandaged on to the wound. When the bleeding has ceased the wound should be dressed and the limb slung from the elbow.

(c) *A ruptured varicose vein*.—In the case of hæmorrhage from a varicose vein the limb should be elevated and pressure applied both above and below the wound, as in varicose veins the valves become distended and allow the blood to flow backwards. All constrictions, such as garters, should be removed. When the bleeding has been controlled, a compress should be applied to the wound, and the limb bandaged from its extremity upwards. It must be kept in an elevated position for some days.

In all cases of hæmorrhage the patient must be kept very quiet, and all exciting influences removed from his presence. After severe hæmorrhages salines per rectum or subcutaneously may be ordered by the doctor. If the shock is very severe the nurse may give a rectal saline before the doctor arrives, should there be any delay in procuring medical assistance.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Her Royal Highness Princess Arthur of Connaught, Duchess of Fife, Miss E. O. Walford, Miss J. Peele, Miss P. Thomson, Miss B. James.

Her Royal Highness, Princess Arthur of Connaught, writes concerning the care of a patient suffering from hæmoptysis:—"Get the patient to bed in a semi-recumbent position. If the nurse has been told from which lung the hæmorrhage is likely to come, she should place the patient on his side with that lung undermost, to prevent, as far as possible, the flooding with blood of the tubes of the other lung, and, in a case of injury, to allow the uninjured lung to work freely."

### QUESTION FOR NEXT WEEK.

What nursing treatment and management are required for a case of infantile wasting?



## VENEREAL DISEASE.

After long years of the "conspiracy of silence" on the subject of that most terrible of racial poisons—venereal disease—the daily papers, leaflets, books, and cinemas vie with one another in presenting the subject to us, and are in agreement as to the importance of such knowledge.

Two societies in this country are chiefly responsible for propaganda—the older one, the National Council for Combating Venereal Diseases, and the Society for the Prevention of Venereal Disease. We prefer the latter name, inasmuch as "prevention is better than cure," immeasurably better when dealing with diseases so horrible, and of such far-reaching consequence to the innocent as the venereal class.

Much of the work of the two societies is on the same lines. The N.C.C.V.D. holds that "no person who has indulged in promiscuous intercourse can be sure that he is not infected, and every such person is therefore bound in duty to him- (or her-) self, and to society, to seek means of cleansing at the earliest moment." At the same time the Council recently and unanimously affirmed that they are "as firmly opposed as ever to any general distribution of prophylactic packets to the members of the civil community."

The S.P.V.D., which has received the support of such distinguished humanitarians as the late Sir William Osler and Dr. Saleeby, stands for "the adoption of preventive measures in the only way which offers any real hope of efficiently combating this terrible scourge. Immediate self-disinfection, requiring no special skill or training, applied at the earliest possible moment, is the method advocated by this Society, and for this purpose the necessary disinfectants must be immediately available." The logic seems irresistible.

It is acknowledged by all who have studied the subject that the first hour after infection is the most important, if it is to be effectively checked, and that every hour which passes lessens the chance of its arrest. In view of the disastrous consequences, not only to the individual, but to the race, it seems imperative to urge the necessity for immediate self-disinfection.

Nurses who constantly come into contact with the consequences of the ravages of venereal disease as demonstrated directly and indirectly in the sufferings of men, women, and

little children, cannot fail to be profoundly moved by them, and should lose no opportunity of studying underlying causes, and the methods which can be applied to their prevention and cure.

## THE ROYAL BRITISH NURSES' ASSOCIATION.

Her Royal Highness, Princess Christian, the President, received a deputation of members of the Executive Committee, and representatives of the affiliated societies, on New Year's Day, at 78, Pall Mall, who conveyed to Her Royal Highness the appreciation of the members for her kind and gracious message of congratulation to all members of the Nursing Profession on the passing of the Nursing Acts.

Mr. Herbert J. Paterson, F.R.C.S., Hon. Medical Secretary, introduced the deputation, which consisted of Mrs. Campbell Thomson, Nurse Hon. Secretary, Miss Bickerton, Miss Cecilia Liddiatt, Miss Alice Cattell and Miss Isabel Macdonald, Mrs. Bedford Fenwick, Society for State Registration of Trained Nurses, Miss M. Heather-Bigg, Matrons' Council, Lieut.-Colonel Goodall, M.D., Miss Bryson, Fever Nurses' Association, and Miss Annie Hulme, National Union of Trained Nurses.

Princess Christian received the deputation in the beautiful gold and white drawing-room, and spoke feelingly of the arduous work for State Registration which had continued for so many years, and wished all success to the Nursing Profession now that it was to be entrusted with power and responsibility by Act of Parliament.

Mrs. Bedford Fenwick presented Her Royal Highness with a bowl of crimson carnations and other flowers in the national colours from the Affiliated Societies, and, with Miss Heather-Bigg, expressed the thanks of the members for the congratulations of Her Royal Highness upon Nursing having attained the status of a Profession.

### A HAPPY NEW YEAR.

The deputation then withdrew, and before parting wished one another a very happy New Year.

Her Royal Highness, the Princess Arthur of Connaught, Vice-President, has forwarded through the office of the Royal British Nurses' Association a gracious message conveying to all nurses her good wishes for the coming year.

Princess Arthur is deeply interested in nursing, and avails herself of every opportunity of studying its theory and practice.

## THE MINISTER OF HEALTH AND THE SOCIETY FOR THE STATE REGIS- TRATION OF NURSES.

The Right Hon. Christopher Addison, M.P., P.C., Minister of Health, has most kindly consented to be present at the General Meeting of Members of the Society for the State Registration of Trained Nurses, to be held at the Medical Society's Rooms, 11, Chandos Street, Cavendish Square, W., on Thursday, January 8th (this week), at 4 p.m.

This will give immense pleasure to the Members of the Society which promoted the first Bill for Nurses' Registration, which was introduced into the House of Commons by the late Dr. Farquharson, Member for West Aberdeenshire, in 1904. We feel sure Dr. Addison, who has so skilfully accomplished the passing of the Nursing Acts, will receive a very warm welcome from the pioneers of this great national reform.

## A THANKSGIVING SERVICE.

We are glad to announce that a Thanksgiving Service for the passing of the Nurses' Registration Acts will be held on Friday, January 23rd, at 7.15 p.m., at St. Martin's-in-the-Fields, Trafalgar Square, by the kindness of the Vicar, the Rev. H. R. L. Sheppard, at which all nurses and their friends will be welcome. A very beautiful service is being arranged, of which we hope to give further details in our next issue, and we feel sure that many nurses who are rejoicing that at last the legislation for which they have worked so long is an accomplished fact, will wish to take part in this public act of thanksgiving.

Will our readers note the change to St. Martin's instead of St. Paul's, Covent Garden, as originally suggested. St. Martin's-in-the-Fields is in a most central position on the east side of Trafalgar Square, and is well known to many nurses owing to the interest taken by its Vicar in the social questions of the day as they affect women. It is a church which is distinguished by being open day and night.

## REJOICING AT ST. THOMAS' HOSPITAL.

We hear that a meeting is to be held at St. Thomas's Hospital to celebrate the passing of the Nursing Acts. We are glad to hear it, and that this pioneer Training School has at last realised, after years of opposition to State Registration, that its promoters were justified in their claim that the State should be responsible for the organisation of the Profession of Nursing.

## NURSING ECHOES.

As many people as possible should see the film "The End of the Road," which deals with the evils of venereal disease, and which will be shown at the Polytechnic Cinema, Regent Street, on January 12th. Medical opinion is strongly in favour of this exhibition, and it has been approved by the Minister of Health. No one under the age of eighteen will be admitted. The pictures bring home the terrible truths in connection with this devastating disease in a very impressive way, and nurses can safely advise the public to attend.

Mr. Joseph Watson, of Wetherby, has presented the sum of £50,000 to the Leeds General Infirmary as a new year's gift. The only stipulation he makes is that the sum of £10,000 shall be invested, and the proceeds devoted to a nurses' pension fund.

This is excellent. Some day, no doubt, we shall have a comprehensive scheme of national pensions for trained nurses, to which they will themselves subscribe, doing away with that sense of fear and apprehension of an impoverished old age. £3 a week should be the annuity aimed at.

There are always interesting speeches made at the annual meeting of the Queen Victoria District Nursing Association at Sheffield, and we note that the work was highly commended by the Lord Mayor, who presided, and other friends, and Government interference was deprecated. We regret to see that the expenditure had exceeded the income by £750. A house-to-house collection was advocated.

The Superintendent (Miss Hancox) reviewed the work of the year, and said she hoped that the authorities, while using nurses for visiting purposes only, would see that there was no shortage of skilled trained nurses for the sick both in hospitals and other institutions, and also in the home. It was to be hoped that Sheffield would never again go through the critical epidemic period of the previous year, when there were literally no nurses available. There had been 2,407 new patients this year, and 305 in addition during the epidemic. It was curious to report that there had been cases of malaria and sleeping sickness. Among the most touching cases with which the nurses had to deal were those of old women. The patient usually lived alone in one room. She was usually locked in and the nurse had to get a key from a neighbour, and then light the fire and cook the food. Often the patient had no other visitors than the doctor, when the latter

infrequently called. The Association would be specially grateful if flowers could be sent to such old women, who greatly appreciated them.

In proposing votes of thanks, Archdeacon Gresford Jones spoke for the new poor, in whom he included clergymen, doctors, nurses, and other professional people. He was surprised to find that £943 covered the whole salary list for the twenty nurses of the institution. They must not forget their nurses in their work of mercy and self-sacrifice.

As a result of an extraordinary meeting of Camberwell Board of Guardians, held last week, Mr. Edmonds (chairman), presiding, the nursing staffs at Constance Road and Gordon Road institutions, as well as at the Infirmary, received additions to their salaries according to the proposed scale—a welcome Christmas present.

A sensational statement concerning the women nurses at the Mental Hospital, Whitechurch, was made recently at a meeting of the Cardiff Trades and Labour Council. The secretary (Mr. J. E. Edmunds) reported upon complaints which had been received from the Llandaff and Barry Division of the Labour Party as to a proposal to introduce women nurses into the mental hospital now that the institution is reverting to civil use. There was ample evidence, said Mr. Edmunds, that the presence of women nurses in male lunatic wards had an injurious effect upon the inmates, both from the standpoint of discipline and of morals. The attendants stated that during the war, when young V.A.D. nurses new to their work, were in the wards, incidents had occurred which had made the male attendants feel ashamed of their sex in the presence of such young girls. Male attendants maintained that it was unreasonable to expect women nurses to undergo such an ordeal. During the war, added Mr. Edmunds, there was mutiny among the male patients of the institution, and it was only by the arrival of male attendants that the women nurses were saved from serious harm. Two of them, indeed, had to remain in bed in consequence of the injuries they received. The Llandaff and Barry Labour Party felt that the public should be informed of the facts, so that the relatives of male patients and the relatives of the nurses should be able to express their opinions before the suggestion became an established fact.

A resolution was unanimously carried, to be sent to the Home Secretary and the Mental Hospital Visiting Committee of the Cardiff

Corporation, asking them to refrain from putting the proposal into operation.

Colonel Goodall, Medical Officer at the Mental Hospital, has made the statement that two thousand cases of mental disorder among troops have been treated at the institution by trained certificated sisters and staff nurses and probationers, with men to help. "No one," he said, "with experience of the presence, example, and influence of trained female nurses, and all that they stand for with regard to humanity, refinement, and devotion, would wish to replace women by male nurses."

As a result of their experience during the war, the committee had, with the consent of the Board of Control, staffed all the male wards, except acute and epileptic, with female nurses. The statement that the women in the male wards had an injurious moral and disciplinary effect on patients, Dr. Goodall dismissed as grotesquely untrue.

"It is also grossly unjust," he added, "to a most refined class of women, and would be strongly resented. The sensational stories probably emanated from three or four malcontent men at the hospital."

With this medical opinion we agree, but who placed inexperienced V.A.D.s in wards where very special experience is required?

## HONOURS FOR NURSES.

The King has conferred decorations as follows:—

### BAR TO THE ROYAL RED CROSS.

Miss Elizabeth Dowse, Queen Alexandra's Imperial Military Nursing Service Reserve.

### THE ROYAL RED CROSS AND BAR.

Miss Katharine Skinner, Queen Alexandra's Imperial Military Nursing Service.

### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Gertrude Aitchison, Miss Gwendoline Hughes, Miss M. Ram, and Miss Cecilia Stevens.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Florence Harley.

*Territorial Force Nursing Service.*—Miss Winifred Attenborough.

### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Agnes A'Hern, Miss Margaret Anderson, Miss Mary Andrew, Miss Edith Aylett, Miss Lucy Brawn, Miss Alice Fletcher, Miss Florence Hyndman, Miss Penelope Roberts, and Miss Annetta Sinclair.

*Territorial Force Nursing Service.*—Miss Portia Batley, Miss Marion Crosbie, Miss Mildred Edwards, Miss Maude Emberson, Miss Florence Henry, and Miss Isabella Stratton.

*British Red Cross Society.*—Miss Lilian Branstons.  
*Civil and War Hospitals.*—Olympia, Mrs. Honeyball, Miss Evelyn Sanders, and Miss Mary Weaver.

#### THE MILITARY MEDAL.

Miss Nellie Galvin, Queen Alexandra's Imperial Military Nursing Service Reserve, and Miss Daisy Dobbs, Territorial Force Nursing Service.

### INTERNATIONAL NEWS.

#### CONGRATULATIONS FROM DENMARK.

Frü Henny Tscherning, President of the Danish Council of Nurses, has sent the following cable of congratulations to Mrs. Bedford Fenwick, President of the National Council of Nurses of Great Britain and Ireland:—"With great pleasure we heard of Nurses' Registration Act. We send hearty and sincere congratulations and best wishes for the future."

#### NORWEGIAN NURSES TO JOIN THE INTERNATIONAL.

Miss Bergljot Larsson, President of the Norwegian Council of Trained Nurses, founded in 1912, and now having 900 members, has written to Miss Dock to inform her that they wish to enter the International Council of Nurses, and adds: "In Norway we have had the usual fights for our profession as the other countries have had for training and registration. We have been rather successful in our fights, and have the best hopes for registration and a good Bill when the time is in for it. Our members must have three years' training at hospitals, and we are very strict in our regulations. We have a registration office, our nursing journal, and a central office for nursing affairs."

Miss Dock's reply is: "Delighted!" So, we feel sure, will be that of the members of all the other National Councils of Nurses, who will give a most hearty welcome to their Norwegian sisters into the International Federation. When and where shall the organised nurses of the world all meet again?—that is the question. With a sympathetic Ministry of Health and a Statutory Nursing Council in England, why not London?

#### FROM VICTORIA.

Next week we hope to be able to report that the Nurses' Registration Bill is a *fait accompli* in Victoria. It has aroused much discussion in the Legislative Assembly. We also hope that the movement for a Federal Nurses' Union—which ceased with the war—has been revived, so that our Australian Sisters may enter the International Council of Nurses, when next it meets. Miss Gretta Lyons, the progressive President of the Royal Victoria Trained Nurses' Association, is a warm advocate of international federation.

### THE NURSES REGISTRATION ACT.

Many readers inform us that they have bought and read the Nurses' Registration Act, but would be grateful for further explanation concerning the Clauses which appear to leave wide powers of action to the General Nursing Council.

#### CONSTITUTION OF THE COUNCIL FOR ENGLAND AND WALES.

The General Nursing Council for England and Wales will be composed of (1) two persons appointed by the Privy Council—who are to represent the general public—and who are in no way concerned with the direction or provision of the services of Nurses. Thus they will have no *direct* interests to serve, and will be employers only, in an individual sense, if sick.

(2) Two persons appointed by the Board of Education. These persons will not necessarily have any expert knowledge of Nursing education, but will presumably bring to the assistance of the Council wide knowledge of existing conditions of general education in its various grades and methods, and of systems of examination.

(3) Five persons appointed by the Minister of Health after consultation with those who have special knowledge of training schools for nurses, of the work of Matrons, of general and special nursing services, and of general and special medical practice.

The majority of these five seats will presumably be allotted to the medical profession so that the various sections may be represented by medical experts—(1) General, Medicine and Surgery, (2) Special, Infectious Diseases, Psychology, and Teaching.

(4) Sixteen trained nurses appointed by the Minister of Health, after consultation with the Central Committee for State Registration, the College of Nursing, Ltd., and the Royal British Nurses' Association. The Minister, in making appointments under this provision, will have regard to the desirability of including nurses having experience in the various forms of nursing. Thus provision may be made (1) for the superintendents of the training schools, (2) general trained nurses, (3) and nurses also with a knowledge of the various special branches such as children's diseases, infectious diseases, and mental diseases; (4) Public Health Nursing, including district, school, welfare and care of infants, maternity and midwifery, and dietetics; (5) Private and Visiting Nursing; (6) Government Services, Military, Naval and Prisons.

In writing of nurses we, of course, include the Matrons as such, and it will be seen that sixteen nurses are not at all too many to provide for expert knowledge of nursing in all its branches on the General Nursing Council.

This First Council is to frame the Rules, and remain in office for not less than two years nor exceeding three.

The new Council, so far as the nurses are concerned, are to be elected by all the nurses

on the Register, according to a prescribed scheme, and are to hold office for five years. What the prescribed scheme of election for the direct representatives of the nurses is to be will be defined in the Rules, and it is not improbable that the scheme suggested in the Central Committee's Bill may be adopted—that is, that each class, composing the General Register, and the various Supplementary Registers, will form electorates for their own direct representation, so that the principle suggested in the Schedule for the guidance of the Minister in making appointments on the First Council shall be adhered to, and "persons having experience in the various forms of nursing" will have seats secured for the class of nurse to be registered. Thus general and special nurses would elect their own representatives. This system would provide for the continuance of expert opinion on the General Nursing Council.

Any member of the Council is eligible for re-appointment or re-election.

#### THE REGISTER.

The Register of Nurses for the Sick is to be formed and kept by the Council and is to consist of various parts.

(a) A General part, which is to contain the names of those nurses trained or engaged in the general nursing of the sick.

(b) A Supplementary part of Male Nurses.

(c) A Supplementary part of nurses trained in the nursing and care of persons suffering from mental diseases.

(d) A Supplementary part containing the names of nurses trained in the nursing of sick children.

(e) Any other prescribed part.

Registrationists have always advocated a General Register, and Male and Mental Supplementary Registers, but have not approved any extension of special registers.

But the new Profession of Nursing is faced with certain existing conditions which must be duly taken into consideration before Nursing can be organised on lines mutually beneficial to the nurses and the public, and we must not forget the lamentable attitude of the managers of Training Schools and others in opposing all reform by State aid for thirty years, nor the apathy and lack of public spirit exhibited by succeeding generations of nurses during that time. Had hospital managers and certificated nurses responded to a sense of public and professional duty thirty years ago, the Profession of Nursing would by now be a highly-skilled, well-disciplined, and well-remunerated body; as it is, abuses have multiplied, and although the Acts lay sound foundations upon which to build, the whole superstructure of professional organisation must be built up. Present conditions cannot be ignored; they must be carefully considered and improved by degrees. First, then, the Acts provide for a two years' term of grace, during which time women of good character, under conditions which appear to the Council to be satisfactory and have adequate

knowledge and experience of the nursing of the sick, may be registered.

Let us take the General Register as an example. Failing the firm hand of the law, every hospital and institution has hitherto been a law unto itself, and thousands of nurses, good, bad and indifferent, without let or hindrance, have been let loose on the public. Thousands of these women are indifferently trained by no fault of their own. Thousands of them have, since training, gained much experience, and done useful work in various branches of nursing. If a hard and fast rule were laid down that no nurse who did not hold a three years' certificate of training was to be registered, great injustice would be done. Thus Queen's Nurses, who in the past were only trained for one or two years, but who now are highly valuable district nurses, would be excluded. The nurses who, at St. Thomas's Hospital, were only given one year's training and a gratuity of two pounds, instead of the present certificate after a comprehensive four years' course, would be excluded. The nurses trained at the London Hospital for two years, and then compelled to do private nursing, would be excluded. The well-educated women who entered hospitals as Paying Pupils at Guy's, Middlesex and many other institutions, who after a year's special training, engaged in various branches of nursing, many becoming Sisters and Superintendents, would be excluded. Delicate nurses, who broke down in one place but gained further experience under less arduous circumstances and are doing useful work, would be excluded. We might cite many other instances. These are the nurses who have a right to be registered during the term of grace, and it would be a great act of injustice to exclude them. But it will be the duty of the Council to get to work in real earnest, to define future curricula of training, so that nurses may soon begin to qualify for the State Examination, and thus be guaranteed to the public as thoroughly efficient and highly skilled nurses worthy of their confidence as "Registered Nurses." But Rome was not built in a day, and we consider that ten years' arduous and devoted work will be necessary upon the part of the Council before a real improvement in the quality of the registered nurses will be decidedly apparent. The Male and Mental nurses will be improved along the same lines.

Then come Supplementary Registers of Specialists such as Children's and Fever Nurses. We have never approved of Specialism in Nursing which is not founded on general nursing knowledge any more than of medical specialism. The Act, however, provides for a special register of nurses trained in the nursing of sick children. The managers of the Children's Hospitals organised and without consulting their nurses pressed for this section—fearing they would not get probationers otherwise—and the Children's Hospital nurses made no effort to counteract this agitation. We think the Children's Hospital managers were mistaken in their policy, as reciprocal training must come in the near future if special hospitals

are to be supplied with probationers. Women will not give four to six years' hard work to qualify in the future.

#### FEVER NURSING.

The Fever Nurses (except indirectly in the Scottish Act) are not specified in the Nursing Acts. Consideration of their registration is left to the decision of the Council. They must either be admitted on to the General Register, or for the term of grace be enrolled on a Fever Nurses' Register. But if they are wise they will through the Fever Nurses' Association, organise for the definition of a term of reciprocal training, so that in the future they will be eligible for the Central Examination qualifying for registration on the General Register. Children's Hospital trainees should do likewise. Thus in a few years these nurses who are now more or less specialists will be thoroughly trained and the whole professional field thrown open to them.

Again, we must remind the nursing profession that years of self-sacrificing endeavour lies ahead of its members, in the organisation of their work—before they can hope to bring order out of chaos.

Next week we will discuss the making of Rules and the Duties and Powers of the General Nursing Council.

E. G. F.

#### A CAUSE CÉLÈBRE.

We are informed that the solicitors of Miss Maude MacCallum, of the Nurses' Co-operation, have issued writs for libel against the proprietors, the Scientific Press, Ltd., of the *Nursing Mirror* and *Midwives' Journal*, and the *Hospital*, against Sir Henry Burdett, the acknowledged editor of both publications, and against the Printers, Spottiswoode, Ballantyne & Co., Ltd. The case will no doubt be of extraordinary interest to members of the nursing profession, but as it is now *sub judice*, nothing further can be said on the matter.

#### THE NURSES' CO-OPERATION.

An unsigned leaflet, issued from 35, Langham Street, the Howard de Walden Home of the nurses on the Nurses' Co-operation, insidiously attempts to influence them how to vote in the forthcoming election for the nurses' representatives on the Committee. To this, seven of the nurses' representatives at present on the Committee, have replied in a well reasoned letter; but as it deals with questions now *sub judice* in "MacCallum versus the Scientific Press, Ltd.," we regret we cannot publish it in full.

#### THE STORE CUPBOARD.

Falière's Phosphatine, which is supplied by Mertens, 64, Holborn Viaduct E.C., is a delicate and delicious preparation which, associated with milk, is invaluable for children as it assists the formation of bone, as well as for invalids and the aged.

### APPOINTMENTS.

#### MATRON

**Cottage Hospital, Norwood.**—Miss Florence Russell, A.R.R.C., has been appointed Matron. She was trained at the Westminster Hospital, and has been Senior Sister at the Princess Christian V.A.D. Hospital, Norwood, and has served as a Sister in Q.A.I.M.N.S.R., in Mudros, Egypt, and India, as well as at home.

**Clonmel Cottage Hospital.**—Miss Ethel Benning has been appointed Matron. She was trained at the Richmond, Whitworth, and Hardwick Hospital, Dublin.

#### ASSISTANT MATRON.

**Royal Asylum, Aberdeen.**—Miss Elspeth MacRae has been appointed Assistant Matron. She was trained at the Royal Infirmary, Aberdeen, and has been Sister at the Morningfield Hospital, and on the staff of the Northern Nursing Home in the same city. She has had experience of military nursing as a Sister at the First Scottish General Hospital, Aberdeen.

#### SISTER.

**Edinburgh Royal Maternity Hospital.**—Miss Margaret B. C. Cowan has been appointed Ward Sister. She was trained at the Victoria Infirmary, Glasgow, and served in military hospitals during the war.

#### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

##### TRANSFERS AND APPOINTMENTS.

Miss Sarah E. Bailey is appointed to Isle of Wight C.N.A. as County Superintendent, Miss Emma Harrington to Herts. C.N.A. as County Superintendent; Miss Gertrude Trotter to Kingston-on-Thames as Superintendent; Miss Jessie Turton to Liverpool (Walton) as Superintendent; Miss Christina M. Grant to Derbyshire C.N.A. as Assistant Superintendent; Mrs. Emily Ferry to Carlisle; Miss Florence E. Filkin to Hawkshead; Miss Alice M. Johnson to Paddington; Miss Mary B. A. Reed to Skelmersdale; Mrs. Rose A. Rutter to Yeovil; Miss Mary McLean Smith to Clacton-on-Sea; Miss Harriet E. Stinchcombe to Chard; Miss Alice Vernon to Ashton-under-Lyne; Miss Elizabeth N. Watson to Bootle.

#### PRIZES FOR FEVER NURSES.

The Heath and Carr Bequests have been divided at the City Hospital, Newcastle, amongst the nurses taking the first four places in the examinations set by the Fever Nurses' Association as follows:—

*First.*—Nurse M. E. Lightbown, received £6 from the Heath Bequest Fund, the certificate of the Fever Nurses' Association, and the Stableforth Gold Medal, as the best nurse in her year.

*Second.*—Nurse A. Hutcheon, received £4 from the Heath Bequest Fund, the certificate of the Fever Nurses' Association, and the Stableforth Silver Medal.

*Third.*—Nurse L. Wilkinson, received £3 from the Carr Bequest Fund, and the certificate of the Fever Nurses' Association.

*Fourth.*—Nurse J. Smith, received £1 10s. from Carr Bequest Fund, and certificate of the Fever Nurses' Association.

The following nurses receive the certificate of the Fever Nurses' Association:—Nurse Wood, Nurse Harle, Nurse Sewell, Nurse Lee, and Nurse Young.



## THE HOSPITAL WORLD.

A caller left at the London office of the Alton Cripples' Hospital, 61, Moorgate Street, E.C., 300 new half-crowns, being one each for the crippled children in the hospital at Alton and Seaside branch at Hayling Island.

The Scottish Women's Hospital Committee are getting busy towards the raising of the £100,000 as a memorial to Dr. Elsie Inglis.

Mr. Seymour Berry, the Welsh coal and steel magnate, has given £10,000 to the Merthyr Hospital, provided the public establish an Endowment Fund of £100,000.

The Poplar Hospital for Accidents has good friends. At a recent festival dinner the Chairman said the hospital had never been in debt, but some very necessary improvements and repairs were needed which would cost about £60,000. The secretary read a list of subscriptions amounting to £15,076, a "record" sum. Towards this the officers of the Port of London Authority collected £10,228.

Sir Joseph Flavelle has given a cheque for £50,000 to the trustees of the Toronto General Hospital towards meeting the debt of £334,000 on that institution.

The Queen's Hospital for Children, Hackney Road, E., will be compelled to close two wards, containing sixty-two beds, within three months, unless funds can be obtained to pay off the deficit. Some 800 little invalids receive every possible attention in these wards annually.

Failing additional support, there can be no alternative to this drastic step, and the Committee earnestly plead for help to avoid the threatened calamity. The deficit has grown to £10,000.

Lovers of books will be glad to know that the Red Cross War Library which brought rest and comfort to thousands of sailors and soldiers during the war, is to be continued. It will be known as the Red Cross War and Peace Library, and an effort will be made to supply the needs of patients in civilian hospitals. No greater boon can be imagined than a plentiful supply of books and magazines for the use of patients, especially the convalescents, and we must all make an effort to further this good work.

## COMING EVENTS.

*January 8th.*—Society for the State Registration of Trained Nurses. General Meeting of Members. 11, Chandos Street, Cavendish Square, London, W, 4 p.m.

*January 12th.*—Screen Play, "End of the Road." Polytechnic Cinema, Regent Street.

*January 23rd.*—Thanksgiving Service on the Passing of the Nursing Acts, for Nurses and their Friends, at St. Martin's-in-the-Fields, Trafalgar Square, W. 7.15 p.m.

*January 29th.*—The Matrons' Council. Winter Meeting. 431, Oxford Street, W.

## ECOLE FLORENCE NIGHTINGALE, BORDEAUX.

Dr. Anna Hamilton writes from Bordeaux to express her gratitude to this Journal "for so kindly echoing what the American nurses mean to do as a memorial to their colleagues who died so gloriously in France." As we reported, they hope to raise £10,000 to build the new Florence Nightingale College for Nurses at Bagatelle, in connection with the Maison de Santé Protestante, over which Dr. Hamilton presides.

The Report of the hospital and school, beautifully illustrated, is to hand, and a wonderful report it is of the devotion of its Directress, and of her able assistants, who together work miracles of teaching and healing.

The Ecole Florence Nightingale is to have a new badge for its graduates; and also a buckle to wear with their uniform. The "pin," in reality a brooch, is to take the form of a little lighted lamp, and is to be of silver and enamel. The buckle, also of silver, is formed of the three crescents—the badge of all Bordeaux officials—adopted, it is said to represent the three curves of the splendid River Garonne which runs through the city. These symbols are of historic interest to us, as Bordeaux was once an English possession, and the English leopard still adorns the city's coat of arms.

The report concludes with "La Dame de la Lampe," exquisitely rendered into French by the mother of the Misses Mignot, who trained, and have helped, as most faithful collaborators of Dr. Hamilton, to build up the high standard of nursing at Bordeaux, in the hospital, and in the district.

Miss Ivy Trawen, trained at the Poplar Hospital, London, has quite recently been appointed Head Nurse of the Children's Department at the Maison de Santé.

It is hoped that this department will be the beginning of the big children's hospital to be built at Bagatelle, as the death rate at the Town Hospital for little children is 80 per cent., a terrible sacrifice of life.

At present the demand on Maison de Santé graduates in the devastated district is so great, that there was not one to spare for the children's ward.

"The American Committee for Devastated France" has shown its appreciation of these nurses by deciding to enrol them for their work, and as there is only one trained nurse in each group of ladies working at reconstruction, this is a pretty high compliment. Each nurse has an automobile with a chauffeur and looks after several villages (7 or 8); she takes scales to weigh the babies, examines children to see if they need to be taken to the doctor, and gives advice on sanitary matters. Most useful and interesting work. "Ten times as many nurses are required than we can supply," adds Dr. Hamilton.

We just long to hear that £10,000 has been gathered up in the States, and the good work

begun at Bagatelle. Its possibilities are illimitable. We always imagine Mlle. Bose, who left this lovely estate for the use of the poor of Bordeaux, is quietly awaiting somewhere in the *Domaine de Bagatelle*, to insist that her intentions are carried out, as they surely will be.

### THE IRISH MATRONS' ASSOCIATION.

The quarterly meeting of the Irish Matrons' Association was held on January 3rd, 1920, at 34, St. Stephen's Green, Dublin. The principal business was the election of office bearers for 1920, which resulted as follows:—

President: Miss Michie, Q.V.J. Nursing Inst.

Treasurer: Miss Thornton, R.R.C., Sir Patrick Dun's Hospital.

Hon. Secretary: Miss Carson Rae, 34, St. Stephen's Green.

### THE IRISH NURSES' ASSOCIATION.

The Irish Nurses' Association held their monthly meeting at 34, Stephen's Green, Dublin, on the 3rd inst., Miss Reeves, R.R.C. (President) in the chair.

The President reported the result of an interview with the chairman of the Council of the Ministry of Health for Ireland, which was considered satisfactory.

### IRISH NURSING BOARD.

It is not improbable that the first Register of Nurses (June, 1919), compiled by the Irish Nursing Board (approved by the Royal College of Surgeons of Ireland), will be its last, as now a Statutory Nursing Council is to be authorised by Parliament, under the Nurses Registration (Ireland) Act, it will naturally be the aim of every well-trained Irish nurse to place her name upon it.

The Irish Nurses' Association—the pioneer Nurses' Society in Ireland—has been very alert in the interest of Irish Nurses, especially since it was recognized that Ireland was to have its own Registration Act, and we have no doubt that some of the clear-sighted and able women who have for so long given devoted service to nursing reforms in Ireland will be selected to form the General Nursing Council under the Act. With their wide experience, their services should be invaluable.

### RESIGNATION.

Miss H. E. Reed, Ivanhoe, Dublin, has resigned the position of Hon. Secretary to the Irish Board, College of Nursing, Ltd. and at a recent meeting her resignation was received with very great regret, and the gratitude of the Board was directed to be conveyed to Miss Reed for the invaluable services she had rendered.

We note that the Board is still "registering" Nurses. Now the Nurses Registration Acts are passed, it is time all nurses' organisations ceased

to take money from nurses for voluntary registration. Much better advise them to save their guineas for State Registration.

### WINTER SALES.

AT MESSRS. G. COZENS & CO., LTD.,  
Edgware Rd., and Seymour St., Marble Arch,  
London, W.2.

With the advent of the New Year the winter sales are beginning, and wise people will pay early visits, if they wish to profit by the exceptional bargains which are offered by some high-class firms.

At Messrs. G. Cozens & Co., Ltd., throughout the house there are great reductions and many bargains in all departments. Patterns of those in the silk department, and in dress and coat materials will be sent on demand, post free. There are also many underskirts, varying in price from 2s. 11½d. to 21s. If money is sent with order, and the goods supplied are not satisfactory, the money will be returned. Coats, furs, blouses, and many other attractive things all share in the general reduction.

AT MESSRS. GAYLER & POPE'S,  
112 to 117, High Street, Marylebone, London, W.1.

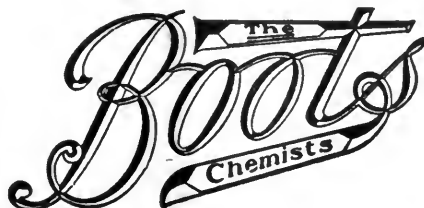
The Annual Winter Sale of Messrs. Gayler & Pope, 112-117, High Street, Marylebone, London, W.1, is always an event in—and far beyond—the Nursing Homes area in the West End. Here are to be found bargains in all departments during the Sale which this year begins on January 9th. White Merino combinations with high necks and short sleeves, at 7s., are in these days a bargain not to be overlooked; but there are only three dozen of these, so those who wish to secure them must be early in the field. Irish embroidered nainsook chemises at 3s. 11d., tweed costumes at 49s. 11d., and serge and tweed skirts at 10s. each, should soon be cleared out, and wise housewives will make a point of visiting the department where household linens, blankets and down quilts are being offered much under to-day's prices. Travellers' samples of ladies plain black stockings (mostly J. and R. Morley's), at 2s. 3d. a pair are bargains indeed. Don't forget the date, January 9th, and be there on time.

### BRITISH FIRST-AID TO AUSTRALIA.

The successful flight of Captain Ross-Smith and his crew on the Vickers-Vimy aeroplane emphasises what can be achieved by courage, skill and foresight. In such a stupendous enterprise nothing dare be left to chance, and, amongst other things to be provided against, are minor accidents and illnesses which would incapacitate members of the crew if treatment were not available. As a precaution against such mishaps Captain Ross-Smith carried a "Tabloid" First-aid outfit of Burroughs Wellcome & Co., of which he reports:—

"It is a complete medical outfit for emergencies, but so compact that it takes up no material space on the machine."

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## BOOK OF THE WEEK.

"ROBIN LINNETT."\*

When Mr. Benson writes, as he so often does, of nice, clean healthy English boys of the leisured class, he is always pleasing. His young men are so full of the *joie de vivre*, that their well being radiates from the pages—it simply exudes from them.

Robin Linnett is a good specimen of this type. The son of a wealthy society butterfly, he, at the outset of the book, is just finishing his university career and the opening chapters ring with the merry inconsequent chatter of undergraduates—with cricket, with rags, with intimate talks between Damon and Pythias, and the undercurrent of earnestness in their careless happiness.

Badsley yawned.

"I'm going to be a schoolmaster because the governor is," he remarked. "And Jim's going to be a clergyman, and Birds is going to be a lord. And to-morrow will be Sunday, and I'm going to bed to-day."

Birds and Jim were left alone, and Birds (Robin's very obvious nickname) began undressing.

"I think I shall start being an atheist," he said. "How am I to start. But it's true that we all do what everybody else does. Are you going to breakfast with me to-morrow, or I with you? I forget whose turn it is."

"Yours. And we can't think, at least, I can't. If I sat down to think I shouldn't know what to think about."

He started whistling away to his own room.

But these light-hearted boys were among those who showed what stuff heroes are made of.

For, of course, the war has to come into the story. It seems impossible for any story to get on without it in these days.

Lady Grote, Robin's mother, was right when she remarked, "You never know about Robin"; and she was not unduly surprised when he arrived to her dinner party in an aeroplane which descended on the lawn in the middle of that function. Below his leather coat was a thick woollen jersey, and Robin, in the midst of tiaras and satins, ate his belated dinner with as little sense of embarrassment as he would have felt if he had been picking a cold duck with Damon."

Lady Grote, still young and fascinating, sailed rather near the wind at times as regards her reputation.

Naturally enough, the boy was utterly ignorant concerning the sum of what the world gabbled or whispered about her, and had he been told it he would have believed not a single syllable.

But the war intervened, and the German musician, Kuhlman, after writing a particularly brutal letter to Lady Grote who had favoured him to the brink of indiscretion, returned to his own country to add his quota of information gleaned from his indiscreet admirers.

Lady Grote was frankly bored with war work, but Lord Grote's proposal that they should equip

Grote as a V.A.D. Hospital enlisted her somewhat tardy sympathy, besides, as she said, "I have an idea that Robin is ashamed of my doing nothing for the war. I only realised it to-night and I did not like it."

Mr. Benson gives a rather revolting chapter, in more senses than one, describing in minute detail the amputation of a leg, and it may be supposed that it is not altogether a flight of the imagination to allow the untrained commandant, who is designated "sister," to inform the surgeon that she is going to be present at the operation at the request of the patient. Of course, Lady Grote is portrayed as having all the "heart and sympathy," while "the two nurses were talking together in the window, and one of them was laughing at something the other had said. One rubbed the tips of her fingers together like a girl enjoying something amusing."

How unseemly that this untrained woman should be present the following quotation proves:—

"A button had torn loose as the nurse took the edge of Jaye's pyjama jacket out of the way, and the whole of his body was exposed, strong and supple and charged with the potentiality of its manhood. Soon he would be a truncated thing, an object of pity."

Mr. Benson has not quite grasped the etiquette of the operating room we imagine, nor yet the requisite skill of the anaesthetist, as he allows the patient to come round while he has half a dozen forceps clinging like leeches to his severed veins and arteries, "and Lady Grote listened to a mumble of obscene things."

The rending of the decent veil which formerly was drawn between the professional environment and the curious public, appears in the eyes of the novelist of the past few years, to be essential to make Society butterflies find their souls. Robin's death on the field of glory, however, is his mother's redemption, and results in reconciliation with her husband.

"Through the estrangements, the unfaithfulness, and all the sequel of marriage, that had so soon been void of honour and love, there shone as through rent mists the gold of a gathered harvest. Robin was dead, and she knew now that it was his unconscious inspiration entirely that had caused her to devote herself to the hospital.

"It was here that she had said good-bye to him, wishing him 'good luck with his honour,' and here that he had said that he and she had never loved each other so much as to-day. Gaze as she might at that door, never would Robin be outlined against it as he left her without turning his head. Something dearly loved—his laughing eyes, his mouth, the body of him that was born of her body, were somewhere buried in France.

"Some day, perhaps, she would know how the supreme moment came, but it was no vital part of him that was concerned in that. That was secondary with something else that grew out of the blackness and glowed before her." H. H.

\* By E. F. Benson. (London: Hutchinson & Co.)

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## JOYFUL TIDINGS.

DEAR PRESIDENT AND EDITOR,—I only learnt the joyful tidings on receiving the B.J.N., having missed the *Times* of December 24th. Am enclosing you a picture of the "La Victoire de Samothrace," which is in the Louvre, being too overcome with thankfulness to express my feelings. I am so glad it has happened in "Victory Year." "Le Roy le Veult" page of the Journal is now in a prominent position with a spray of olive attached. But can't we have a "Victory Number" with a résumé of the whole campaign, and photos of all those who have helped us so much?

Yours sincerely,

E. PAULINE SHEKLETON.

Hotel Bristol, Cannes.

## IS IT A SPLENDID OPPORTUNITY?

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I send you the following cutting from the local Press and should like to know what will be the position of women who avail themselves of this "splendid opportunity" at the end of the three years' contract for which time I believe they bind themselves to the County Nursing Association. Will they be eligible for Registration under the Act, for if not it will certainly not be a safe "career" for any woman:—

## "A CAREER FOR WOMEN.

Is it realised that there is an opening for suitable women to enter an honourable and useful profession, not only without payment of any premium, but with all expenses paid during the period of training? Any suitable woman between 22 and 40 who applies and is approved can be trained for a year in the Plaistow Training Home, London, as a District Nurse and Midwife. During the year of training the candidate is kept free at the Home, and is paid £1 per month pocket money, with a bonus of £5 at the end of the year. A post is then guaranteed to the candidate who starts her work with a salary of £80 a year, while her uniform, boots and shoes, and a bicycle are provided for her.

It is the Bedfordshire County Nursing Association which through the County Council is able to offer this splendid opportunity to women, and the strange thing is, so we understand through the Secretary, Mrs. Dodd, 5, Linden Road, Bedford, that she has not been overwhelmed with applications. There must be a considerable number of women who, if they really understand the nature of the opportunity thus offered to them, will be quick to seize it."

Yours truly,

A CERTIFICATED QUEEN'S NURSE.

[The standard of training for all Public Service nurses, to which district nurses belong, will no doubt receive the earnest consideration of the General Nursing Council. These village nurses

are primarily midwives, and presumably are registered by the Central Midwives Board. We have always held that they should therefore work under their own legal title of "Certified Midwife," and not claim the title of nurse.—ED.]

## KERNELS FROM CORRESPONDENCE.

*Member Leicester League.*—"I am proud our League took part in the work for registration. Our delegate on the Society for State Registration of Nurses, Miss E. Pell-Smith was a splendid representative for many years, and kept us well up to the mark. Members for Leicester knew all the ins and outs of the question, and I hope kept their pledges to support us in the House of Commons."

*From the Hedge.*—"Alas! I am one of those who sat on the hedge on the registration question during the gallant fight, but don't think I admire myself for it, quite the reverse. Perhaps it is not too late to help to make the Act a success."

(Far from it, if the Act is to be a success, every well-trained nurse must help to make it so.—ED.)

*Early Bird.*—"Where am I to apply for registration? I want to be one of the first on the list. It seems like a dream that State Registration has come at last. I can hardly believe it; a guinea seems a very small fee for such a privilege."

(All information on registration will be given in these columns. You cannot register until the General Nursing Council has been appointed, and the Rules have been approved by the Minister of Health.—ED.)

*One of the Rank and File.*—"I never shall forget being present in the House of Lords to hear the King's Assent given to the Nursing Acts, and to be seated on the "crimson benches," almost took my breath away. It was lovely of Lord Lincolnshire to let us be so greatly honoured. I agree with "One of the Old Guard," that the whole ceremony was most beautiful and imposing, and a young Lord Chancellor is quite in touch with the age. I hope now that our Bill is through that trained nurses will not altogether desert the Lobbies, as I for one feel I have learned a lot by coming into touch with so many politicians, from whom the nurses received so much courtesy and kindness throughout the months of agitation for State Registration."

(We are inclined to think that it is very difficult to be a thoroughly good citizen, or patriot, unless one is a conscientious politician.—ED.)

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*January 10th.*—What nursing treatment and management are required for a case of infantile wasting?

*January 17th.*—An anastomosis has to be made between the stomach and jejunum. How would you prepare the patient for four days before the operation?

## **The Midwife.**

### **LONDON FEDERATION OF INFANT WELFARE CENTRES.**

A deputation from the London Federation of Infant Welfare Centres, 92, Fleet Street, E.C.4, was recently received by the Minister of Health when the results of a preliminary survey of Centres in London were discussed.

SIR HENRY HARRIS, M.P., who introduced the deputation, said that London had special problems of its own. He urged that the voluntary centres should be encouraged to continue their work as part of properly co-ordinated borough schemes.

MRS. WALEY JOSEPH said that there were three ways in which the municipalities had given help to voluntary centres:—(1) by taking over the Centres; (2) by giving help in kind—allowing the use of premises; or (3) by repaying the centres for work done. The third way was likely to be the most successful; the second often leading to friction.

The fear of losing the personal touch had been expressed by the mothers, the workers and the midwives. The success of the centres depended upon the confidence which the mother reposed in those that carry on the work. She thought that if the centres could receive adequate assistance in the way of grants, the work could be developed in many ways, and the centres would be enabled to employ a sufficient number of highly skilled health visitors.

DR. H. H. MILLS considered that the Health Visitor should visit as her chief function, and pay special attention to the mothers who do not come to consultations.

DR. ADDISON replying to various points raised said that he recognised, as indicated in the past, the essential nature and great value of the work of the voluntary centres.

As regards the specific questions which Sir Henry Harris asked, he believed that the centres now got their grants directly, and so long as the present organisations of the local health agencies continued, he did not intend to interfere with the practice.

Another question put forward must be carefully scrutinised. It was suggested that, when the borough councils submitted proposals to the Ministry, before it took any action in the matter, it should consult the voluntary and other agencies interested. He hesitated to commit himself to any promise on that point. But in the controlling and directing of child welfare centres, it would be in everybody's interests to keep in as friendly touch as possible. He did not propose to place any obstacle in the way of direct communication.

With regard to Mrs. Waley Joseph's point, he would see what could be done in the matter of advancing the payment of grants; whether something could be arranged in the way of making payments on account.

As regards the need for co-ordination, there was, as they said, no central guiding authority in London with power to deal with it. That was the centre of all their difficulties. If there had been such a body, it would have been a great advantage. At the present stage, he was anxious not to prejudice the future by setting up any fresh temporary or emergency arrangements; but he was considering in detail proposals for the improvement of the health services of the country generally. That was why he seized upon Sir Henry Harris' phrase "the absence of any guiding authority." He hoped that, before long, it would be possible to introduce measures for securing a properly directed and co-ordinated health administration. He would seek to make the best use of voluntary health agencies and give them sufficient freedom in their pioneer work. In various directions, they had broken fresh ground. It would be a great pity to lose that valuable assistance, and they might be quite sure that he should not do so.

### **EXTRA SUGAR FOR ARTIFICIALLY FED CHILDREN.**

The Ministry of Health have arranged with the sugar distribution branch of the Ministry of Food that, with certain modifications, the extra supply of sugar authorised for artificially fed children who are regular attendants at Child Welfare Centres shall be continued. To be eligible for this extra ration a certificate must be produced from the medical officer or superintendent of the centre declaring that the child is between 6 and 18 months of age, that it needs an additional supply and is not attending an institution where such a supply might be obtained.

### **THE CENTRAL MIDWIVES BOARD FOR IRELAND.**

The Midwives Act for Ireland will now shortly come into full effect, and, after February 7th, 1920, —when the term of grace expires for midwives to claim admission to the Midwives Roll on the ground of holding certificates from recognised maternity hospitals, or of having been in bona-fide practice on the passing of the Act—all candidates for enrolment will be required to pass the examination of the Central Midwives Board for Ireland.

At a recent meeting of the Board arrangements were discussed for examinations to be held in Dublin, Belfast, and Cork in June next. Thus the three Acts will come into line, as in England and Wales, and Scotland, admission to the Rolls is already dependent on passing a one-portal examination under each of these authorities.



# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### THE NURSES' THANKSGIVING.

"It is a comely fashion to be glad  
Joy is the grace we say to God."

The Service of Thanksgiving for the passing of the Nurses Registration Acts, which is to be held at the church of St. Martin's-in-the-Fields, Trafalgar Square, London, W.C., on Friday, January 23rd, will afford an opportunity of expressing the joy in the hearts of nurses, and their public thanksgiving, that at last laws have been placed on the Statute Book of these Realms which will enable them so to organise their profession that it will be a much more efficient instrument than ever before, for the service of the sick and suffering, and, through preventive nursing, for raising the whole standard of the national health.

For that high aspiration has been the driving force behind the work for the State Registration of Trained Nurses these many years—not the mere enrolling on a Register of a list of names. The power behind the Register is that vested by Parliament in the Governing Body of the Nursing Profession, whereby it can define the standards, and maintain the honour of the profession. This, fundamentally, is what State Registration implies, and there is cause for rejoicing that the Minister of Health—in constituting a Council composed practically of two-thirds nurses—has placed the efficiency and honour of the nursing profession in its own keeping. It remains for nurses to appreciate, and discharge aright, this high responsibility.

The service at St. Martin's-in-the-Fields, on Friday, January 23rd, will be held at 7.15 p.m., and will last rather more than an hour. We are glad to announce that the Address will be

given by the Rev. A. H. R. Robinson, M.A., Mus.B., Precentor at St. Martin's, who has taken a most kind interest in the arrangements. The hymns selected are "O God, our help in ages past," "Praise, my soul, the King of Heaven," and "At even, ere the sun was set," and the service will include the Lord's Prayer, the Magnificat and the Te Deum, and Special and General Thanksgivings. The collection, after defraying the expenses of the service, will be given to the Trained Nurses' Annuity Fund.

The Order of Service will be found in detail on page ii of the cover in this issue, and our readers are advised to keep this for reference.

St. Martin's-in-the-Fields is in a most central position in Trafalgar Square, where all omnibus routes converge, close to Charing Cross Station. The service will be one in which every nurse can join, and we hope those off duty will do their utmost to be present on this very memorable occasion.

United thanksgiving is not a very common practice; and yet "it is a comely fashion to be glad," and for the members of a profession to rejoice together over matters which affect them, not only personally, but collectively. As a profession we have a history of our own, a duty of our own, an allegiance of our own, and only we ourselves know how intimately and vitally we are affected by the recent legislation, and what profound cause we have for thanksgiving. Let us meet together and acknowledge it, and with hearts atune to the greatness and joyfulness of the occasion say our "grace to God."

Whoever may  
Discern true ends here shall grow pure enough  
To love them, brave enough to strive for them,  
And strong enough to reach them, though the road  
be rough.

*E. B. Browning.*

## OUR PRIZE COMPETITION.

### WHAT NURSING TREATMENT AND MANAGEMENT ARE REQUIRED FOR A CASE OF INFANTILE WASTING?

We have pleasure in awarding the prize this week to Miss M. E. Ross, 14, St. Thomas Street, S.E.1.

#### PRIZE PAPER.

Infantile wasting, or Marasmus, though often associated with specific diseases, such as syphilis and tuberculosis, may be generally regarded as a definite type of disease due to disordered nutrition, and marked by an alarming loss of weight.

It is seldom ever a primary condition, and this in itself adds to the difficulty of successful management. As may be readily imagined, the tendency to complications in the enfeebled state of the infant is great, and the chief cause of death is very often broncho-pneumonia.

The most characteristic symptom of the disease is a lack of tolerance to food. The intolerance assumes varying forms, but is mostly directed against fats. The loss of weight varies, but continues on the downward grade. The infant presents the picture of a famine child, is restless and irritable, and indeed may cry for hours at a stretch. The temperature and pulse vary, but towards the end the pulse may become very slow, and the breathing of the Cheyne-Stokes type. Occasionally the power to suck and the appetite remain unaltered, but the fall in weight continues nevertheless. The stools are not infrequently of normal appearance, but may either be watery and slimy or bulky and fatty.

The only hope of a cure in a case of true Marasmus is by careful manipulation of the diet on the part of the physician, and intelligent nursing on the part of the nurse. The lack of tolerance is generally more marked in the case of fats, and if it does not extend to sugars and carbo-hydrates, the prognosis is fairly hopeful. At the same time it must be observed that the risk which the infant runs from a sugary or starchy diet is considerable, owing to the readiness with which fermentation can be set up in the intestines. In the case of an artificially-fed infant for whom a suitable wet-nurse can be found, remarkable improvement has been effected by the breast milk.

Though first place must be given to the endeavour, by careful observation and weighing of the child, to find a suitable diet, it must be remembered that the general condition of the infant is low, and requires careful watching. Undue loss of heat from the surface of the body must be prevented and on the first symptoms

of collapse prompt measures taken, *i.e.*, the infant must be placed in a mustard bath (temp. 105°), then given one or two ounces of rectal saline with a few drops of brandy in it, and kept very warm. Strict attention must be paid as to the nature of the stools—whether digested or undigested, etc.—and should there appear to be symptoms of intestinal putrefaction, the colon must be washed out with warm saline.

The cleanliness of the mouth and nasal passages must be extreme, as any sepsis there may lead to disastrous consequences in the child's already enfeebled condition.

A 10 per cent. solution of Argylol is useful in checking the onset of nasal catarrh, a drop being injected into each nostril. Some physicians recommend the prophylactic use of the H.O.F. ointment (2 per cent.) night and morning. Should there be an ulcerative condition of the mouth, it is advisable to paint it with Argylol once or twice, then continue with Glycerine till cured.

Fresh air is, of course, essential to the cure of this as of every other disease.

If the nurse be a trained masseuse, so much the better, as these wasting children are much improved by a course of general massage. It gives tone to the wasted muscles, and helps the powers of absorption to a wonderful extent.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Dorothy F. Sheppard, Miss Grace A. Tomson, Miss M. James, Miss E. Fannin.

Miss Dorothy F. Sheppard writes:—The onset of this disease is usually with fever and vomiting, infection by micro-organisms being thought to take place through the nose to the brain, and thence to the lower segment, in the anterior horn of the spinal cord, thus causing flaccid paralysis.

Following this, loss of power in one or more limbs, and sometimes the spine itself, and by the tenth day wasting of the muscles of the affected parts becomes noticeable. As a rule the lower limbs are more affected than the upper ones.

To commence with, the child should be put to bed in warm blankets, with hot bottles if possible, and medical advice called for.

The child should be kept flat with one pillow only for the head, and also be kept free from all excitement.

#### QUESTION FOR NEXT WEEK.

An anastomosis has to be made between the stomach and jejunum. How would you prepare the patient for four days before the operation?

## IN AN INDIAN HOSPITAL WARD.

I consider the case I give below a very interesting one, and the first one I have seen recover from this particular accident.

B. R., a little Indian boy, aged ten years, run over by a motor-car, was brought in by the police with multiple injuries, and also complained of pain over the abdomen and left lumbar region, had bleeding from the nose and had vomited.

On being admitted, an operation at once was decided on by the surgeon. The patient was prepared for operation. An incision was made in the middle line, a little to the right, about three inches long, and afterwards extended an inch above and below. A large quantity of blood was found in the peritoneal cavity, and a tear on the inferior surface of the liver lateral to the gall bladder, extending for about two inches. The tear in the liver was bleeding. Another incision was made communicating with peritoneal cavity just below the costal margin on the right side in the anterior axillary line about one and a half inches in length. Gauze packing was inserted between the gall bladder and the lateral surface of the liver and the tear packed. One end protruding through the incision, the peritoneal cavity was swabbed and the abdominal incision closed with silk gut sutures. A part of the lateral incision was also closed with silk gut sutures. On patient being brought back to wards the surgeon said: "There is no hope for the child."

At the beginning condition very bad indeed. Pulse 152, Respiration 44. On admission into hospital the patient was unconscious. After operation, given mixture of Cal. Chloride and Digitalis. Dressed twice daily, when a discharge of blood and bile was noticed. Normal saline was given per rectum for many days, and the patient put on small quantities of milk and barley water, which gradually were increased. Admitted 25.7.19. On the 6.8.19 pus accompanying the discharge, which varied in quantity from day to day. On the 20.8.19 a deep incision was made in the former wound and a drainage tube inserted. On the 2.9.19 temperature rose to 103.6, pulse 124, and respiration 36. Drainage tube removed and packed with iodoform gauze. Pus still from wound. 5.9.19 drainage tube again inserted. 12.9.19 patient developed dysentery which was treated with Inj. Emetine. After some days the drainage tube was removed and the wound looked a healthy one and the sinus gradually healed. The dysentery also yielded to treatment and the boy was discharged cured on the

18th September, 1919. I consider this an exceptionally good recovery. I have seen other cases of injury to the liver but none survived after a few days.

AMELIA M. BURKE.

Bombay.

## THE MATRONS' COUNCIL.

The Winter Meeting of the Matrons' Council, at which Miss M. Heather-Bigg will preside, will be held, by the kind invitation of Mrs. Walter Spencer, at 2, Portland Place, W., at 3 p.m., on Thursday, January 29th, and a very memorable meeting it will be. Tea will be served after the meeting at 4.30 p.m. The present generation of Matrons knows little of the fine organisation work for the profession accomplished by the Council in the past. For many years—from 1896 to 1904—it was the only nurses' society which stood firmly for the State Registration of Nurses, and for nursing organisation in general. Its past reports might well be read up by the younger members—and by hospital matrons who stood aside until 1919.

At the meeting on January 29th, Mrs. Bedford Fenwick will speak on "The Nurses' Registration Act and the Duties and Responsibilities of the General Nursing Council."

There should be a large gathering to take part in this happy occasion.

## THE EDITH CAVELL MONUMENT.

The attention of those nurses who take part in the Thanksgiving Service at St. Martin's-in-the-Fields on Friday, 23rd inst., will naturally be attracted by the Edith Cavell monument on the North-East corner of the Square, at the junction of Charing Cross Road and St. Martin's Lane, with which good progress is being made.

On Tuesday there was an interesting function, when Viscount Burnham placed in a cavity of the structure a leaden box containing documents relating to Edith Cavell's life. The casket, on the front of which is the moulded head of a lion, was the gift of the Worshipful Company of Carpenters, and, in addition to copies of *The Daily Telegraph* describing the history of the memorial, the heroism of Edith Cavell, and the manner in which she met her death, there are, says that paper, the signatures of the King and Queen on vellum bearing the Royal Arms, and documents with the signatures of the King and Queen of Belgium. The box also contains a complete list of the subscribers.

## NURSING ECHOES.

As it was realised that Members of the Royal British Nurses Association would, with our other readers, desire a full report of the General Meeting attended by the Minister of Health on January 8th, to save space the R.B.N.A. Supplement will appear next week instead of in the present issue.

Disabled nurses who are not able to continue nursing in consequence of their war service are to be given free training in other occupations by the Ministry of Labour.

About 1,000 nurses are receiving pensions because of disablement in the war. Only one or two have lost limbs, but others are suffering from malaria, tuberculosis contracted through exposure, and heart trouble, the result of overstrain. There are many with nervous troubles also.

The training will be offered according to their previous experience. The courses arranged by the Training Section include: Dispensing, X-ray work, medical electricity, public health and infant welfare, institutional house-keeping, embroidery. The nurses will be required to have a certificate from the medical officers of the Ministry of Pensions that they are fit to follow the occupation chosen. No training will be given for any work in which there is not a reasonable chance of employment.

Only pensioned nurses will be accepted. The maximum time for training will be twelve months.

Disabled nurses should apply to the Controller, Women's Training Branch, Ministry of Labour, St. Ermin's Hotel, Westminster, S.W.1. Letters should be marked "Disabled Nurses."

The Church Army has inaugurated "The Guild for the Shell-Shocked," for the furtherance of the Society's work for ex-Service suffering men. Such cases require the most expert and patient treatment, and deserve all the tender care available.

A Concert and Variety Entertainment is being held on the 12th of February, in the Hall of the Northern Polytechnic, in aid of the Nurses' Home appeal of the Great Northern Hospital Progress Fund. In these days it is almost impossible to maintain a satisfactory nursing staff at any hospital unless a comfortable residence is attached for the nurses. Moreover, the Nurses' Home is the Nurses' School, and facilities in these progressive times must

be arranged for teaching and study. Now the Nursing Acts are to be put in force, Nursing Education must be sound and efficient. Rule of thumb will not suffice in the future.

Princess Helena Victoria, President of the League of the Roses, has kindly consented to distribute badges to members at the Great Northern Central Hospital, on Thursday, 12th February.

It is hoped that the new Nurses' Club in Edinburgh will soon be opened. Mrs. David Wallace has been appointed Secretary of the Appeal Committee. We wish it the success attained by a similar institution in Glasgow.

We hope when "Registration" does not require so much of our space to have something to say on Private Nursing. From information at our disposal there is a crying need for further home comforts for private nurses in London. At the present cost of administration it is a very difficult question to solve, but the fact remains that if highly trained and refined private nurses are to be available, who are not a sweated class, in London, more home life between cases must be provided. What can be worse than that overstrained and hopeless women should enter private houses to cope with stress and difficulties? Well-managed Nurses' Residential Clubs are a very real need, and we hope the R.B.N.A. will succeed in its earnest endeavour to organize one. If nurses were willing to help themselves it would be a good beginning.

We note that in several districts a fund is to be opened for the establishment of a Nursing Service as a War Memorial—"on broad and comprehensive lines."

The Committee of the Stretford Division of the British Red Cross Society have offered the sum of £6,000 for this purpose. It is hoped by the nursing service to make it possible for every resident, in the event of sickness in the household, to have the help of qualified nurses. To those in needy circumstances it is desired that the service shall be free or subject to a nominal charge only.

Care must be taken that these Red Cross schemes do not undermine the economic stability of trained nurses in private and district work in the locality, and that sufficient salaries are offered and maintained for those employed. All over the country at the present time in rural districts the village nurses' services are often claimed by well-to-do people.

who merely pay a small subscription to the central fund, and get their nursing, such as it is, for comparatively nothing.

A warning sounded by Miss Lavinia Dock in a letter to hospital superintendents, printed in the *National Hospital Record*, so far back as January 15th, 1909, can be well heeded at the present time. She says:

"The plea for laxity in preliminary educational standards, low entrance requirements for hospital training schools, and even for shorter terms of training, is often made with great skill of argument, and can be so presented as to sound extremely plausible; especially when present difficulties, graphically portrayed and emphatically dwelt upon, are placed well to the forefront of the statement.

"Yet it is a singularly shortsighted plea—that of providing at all costs for the present, without reflection as to the future. It is, indeed, an unstatesmanlike type of mind that can advocate a deliberate choice of lower, instead of higher standards of education, because this kind of policy tends ultimately to self-destruction. It is like the pit that one digged and into which he himself fell.

"The thing of real importance is not that nurses should be taught less, but that all women should be taught more; not that courses of training for any serious work should be shortened, but better filled.

"The present is urgent, but those in places of responsibility and authority have not the moral right to ignore the future."

As we have already announced, it was decided to wind up the Asylum Workers' Association at the end of last year, the grounds being that "for business people to carry on in face of warning of impending financial collapse would be the height of folly," and that "the necessity for the further existence of the Association would seem to have disappeared, to judge by the poor support which it has been receiving at the hands of mental hospital workers."

It has further been decided "that the Convalescent Fund of the A.W.A. be handed over to the Medico-Psychological Association, with the request that applications for grants from old members of the A.W.A. receive special consideration."

A special meeting of the Central Executive Committee of the A.W.A., at which Dr. Shuttleworth recently presided, decided that the Association should ask for recognition on behalf of mental nurses in connection with the Nurses Registration Bill then before the House

of Commons, "it being the only Association of mental nurses which could possibly be represented in connection with the new Bill." The two candidates adopted were: Mrs. Chapman, M.P.A., Hon. Treasurer, who has held Matrons' posts in several mental hospitals; and Mr. Harry Howes, M.P.A., Inspector, Metropolitan Mental Hospital, Tooting Bec.

We are glad that the Association was on the alert as to the interests of mental nurses in connection with the State Register, but we wish that it had supported the Central Committee for the State Registration of Nurses in its work, both by sending delegates to share its deliberations, and by contributing to the expense of its Parliamentary campaign.

Mr. Herbert Morrison, Secretary of the London Labour Party, has written to the Minister of Labour in opposition to "the endeavours of the Mental Hospital Association to secure exclusion of mental nurses from the 48 Hours Bill."

The post of Matron of the Chelsea Hospital for Women, now vacant, is an interesting and important sphere of work, and no doubt there will be many applicants. Full particulars are given in our advertisement columns, from which it will be seen that candidates must be between the ages of 30 and 40, and must have had at least three years' training in a large general hospital, and experience in hospital administration. Two former Matrons of this hospital were Miss Mildred Heather-Bigg, R.R.C., late Matron of Charing Cross Hospital, and Miss M. S. Riddell, R.R.C., now Principal Matron, Q.A.I.M.N.S.

As will be seen from our advertisement columns, the Birmingham General Hospital has recently revised its scale of salaries for the Nursing Staff. The Ward Sisters now receive £60, rising by £5 a year to £75. The Probationers receive £18, £22 and £28, and Staff Nurses £40. Corresponding increases have been granted in the higher nursing posts.

The Southwark Guardians have decided to increase the war bonus to Probationer Nurses from £5 to £15 per annum as from the 1st December, 1919, such increase to apply to existing Probationers, as well as to Probationers appointed subsequently to that date, the salary to remain as at present, *viz.*, £20 for the first year, £23 for the second year, and £26 for the third year.

## HONOURS FOR NURSES.

### THE ROYAL RED CROSS (SECOND CLASS).

The King has given orders for the following appointments to the order of the Royal Red Cross (Second Class) for valuable services rendered in connection with military operations, dated June 3rd, 1919.

*Canadian Army Medical Corps.*—Miss Y. Baudry, Matron; Miss B. H. Bennett, Nursing Sister, Canadian Red Cross Officers' Hosp., North Audley Street; Miss G. Billyard, Nursing Sister, No. 5, Canadian Gen. Hosp., "Kirkdale," Liverpool; Miss L. N. Brown, Nursing Sister, No. 5, Canadian General Hosp., "Kirkdale," Liverpool; Miss L. E. Denton, Nursing Sister, 16th Canadian Gen. Hosp., Orpington; Miss E. MacI. Dewar, Nursing Sister, H.M.A.T., *Araguaya*; Miss E. M. Dewey, Nursing Sister, 16th Canadian Gen. Hosp., Orpington; Miss M. Duffield, Nursing Sister, H.M.A.T. *Araguaya*; Miss E. M. Fraser, Nursing Sister, Canadian Red Cross Officers' Hosp., London; Miss E. L. Hammell, Nursing Sister, 16th Canadian Gen. Hosp., Orpington; Miss I. M. Harcourt, Nursing Sister, No. XL, Canadian Gen. Hosp., Shorncliffe; Miss N. L. Harper, Nursing Sister, 16th Canadian Gen. Hosp., Orpington; Miss A. C. MacDougall, Nursing Sister, Canadian Red Cross Officers' Hosp., North Audley Street; Miss L. M. McConachie, Nursing Sister, 16th Canadian Gen. Hosp., Orpington; Miss M. H. Murray, Nursing Sister, H.M.A.T. *Araguaya*; Miss F. A. Page, Nursing Sister, H.M.A.T. *Araguaya*; Miss E. J. Patterson, Sister in Charge Canadian Red Cross Officers' Hospital, North Audley Street; Miss H. H. Rice, Nursing Sister, Canadian Red Cross Officers' Hosp., North Audley Street; Miss M. E. Sunley, Nursing Sister, Canadian Red Cross Officers' Hosp., North Audley Street; Miss E. A. Thom, Nursing Sister, H.M.A.T. *Essequibe*; Miss E. E. Thompson, Nursing Sister, H.M.A.T. *Araguaya*; Miss E. M. Whitney, Nursing Sister, Canadian Red Cross Officers' Hosp., North Audley Street.

*Australian Army Nursing Service.*—Miss R. E. K. Quarterman, Matron; Miss L. J. Rinder, Matron.

*New Zealand Army Nursing Service.*—Miss C. R. Clark, Sister; Miss A. B. Finlayson, Sister; Miss E. G. Hay, Sister; Miss S. E. Morley, Sister; Miss A. B. Smith, Sister; Miss V. M. Trott, Sister.

*Newfoundland.*—Miss M. Mahoney, V.A.D., Nurse, Newfoundland Nursing Service, Mil. Infectious Hosp., St. John's, Newfoundland; Miss D. Sterling, V.A.D., Nurse, Newfoundland Nursing Service, Mil. Infectious Hosp., St. John's, Newfoundland.

*West Africa.*—Mrs. E. L. Chevallier, Nurse, Tower Hill Hosp., Sierra Leone; Mrs. E. M. Faunce, Nurse, Tower Hill Hosp., Sierra Leone.

An Association of Surgeons of Great Britain and Ireland has been inaugurated.

## SOCIETY FOR THE STATE REGISTRATION OF TRAINED NURSES.

### GENERAL MEETING OF MEMBERS.

A General Meeting of Members of the Society for the State Registration of Trained Nurses was held on Thursday, January 8th, at the Rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, London, W.

Mrs. Bedford Fenwick (the President) was in the Chair, and was supported on the platform by Major Barnett, M.P.; Lieut.-Col. Goodall, M.D.; Miss M. Heather-Bigg, R.R.C.; and Miss Isabel Macdonald.

The room was crowded far beyond the doors, which were left open, by members evidently in a most enthusiastic mood—and, throughout, the proceedings were constantly and warmly applauded.

The Chairman, on rising, announced that Dr. Addison, the Minister of Health, had kindly consented to attend the meeting—(loud applause)—and as he might only be present for a short time, it might be necessary to transpose the items on the agenda and to take the Votes of Thanks first, so that the Minister might be thanked in person, and the meeting have the great pleasure of listening to his response.

The Chairman then called on the Hon. Secretary (Miss M. Breay) to present a short Statement on the progress made since their meeting in July.

### STATEMENT BY HON. SECRETARY.

When we last met, at our Annual Meeting in July, the Annual Report then presented stated (1) That the Nurses' Registration Bill, introduced into the House of Commons by Major Barnett, had been obstructed on the Report Stage by the representatives of The College of Nursing, Ltd.; and (2) that the Minister of Health, Dr. Addison, had given a pledge to the House of Commons, on June 27th, that he would bring in a Bill for the State Registration of Nurses at the earliest possible date.

This was the position when Parliament adjourned in August for the Recess.

On the reassembling of Parliament, Dr. Addison prepared his Bill, after consultation with members of the Executive Committee of the Central Committee for the State Registration of Nurses, and with representatives of the College of Nursing, Ltd. The result of these conferences was that, when introducing the Bill, Dr. Addison announced that it was an agreed Bill.

It received the same warm welcome in the House of Commons as Major Barnett's Bill had done.

The great difference between the Government Bill and those which preceded it, was that the Minister of Health for England and Wales, not having jurisdiction over Health matters in Scotland and Ireland, introduced a Bill for the Registration of Nurses limited to England and Wales, and



initiated similar legislation for Scotland and Ireland.

These three measures which were almost identical, passed through Parliament with a few verbal alterations, and received the Royal Assent in the House of Lords on December 23rd, the last day of the Session, before Parliament was prorogued.

#### REPORT ON THE PASSING OF THE NURSES REGISTRATION ACTS BY THE PRESIDENT.

The Chairman then said :

"The occasion on which we are called together to-day is a most auspicious one, and I have—as your President—to report to you that your Society, which was founded seventeen years ago to obtain an Act of Parliament for the legal registration of nurses, has accomplished its work. (Applause.) No one in the nursing world knows better than the nurses in this room what that work has been : It has been collar work all the time. We have had to find the brains ; we have had to find the voluntary workers ; and, more than that, we have had to find the cash to carry out extensive propaganda work throughout the United Kingdom. We have done all those things, and we are to be very greatly congratulated that we have, as a body of professional women, found the brains in our own ranks, found the spirit to conduct the campaign, found the soul to sustain it, and found the money to pay for it. (Applause.) It is an exceedingly honourable record, upon which I congratulate you heartily. The work of those seventeen years, as I and you know well, has been very uphill work, but it has been a splendid work, and I think it has brought out the very best nurses in the United Kingdom. All those nurses who joined this Society and gave it their help during those years of great discouragement, have proved themselves to be worthy of the Profession of Nursing, and worthy of the title of 'Registered Nurse,' worthy of the confidence not only of their colleagues, but worthy of the confidence of the public. That is a very hopeful beginning, and I only wish that the Minister of Health had been here so that he could have heard that short record of what we set out to do and how we have done it. We were the first Society to promote a Bill for the Registration of Nurses. We were founded in 1902, and in 1904 we promoted our Bill. I have here a little bundle of Bills which have been introduced session after session for fourteen years. And I am very thankful to be able to report to you that when I take up the Act promoted by the Government, I find it incorporates nearly every section and fundamental principle which we incorporated in our Bill all that time ago. (Applause.) The Government Act gives to the nurses a splendid opportunity of organising their Profession and of building it up, not only for the benefit of the public, but also for the benefit of themselves. The principal thing we asked for was a Governing Body, so composed that we could largely govern ourselves. The Government has granted that. (Applause.) That

is the finest thing in the Act—that is professional enfranchisement. (Hear, hear.) It is the very essence of the Act ; without it, the whole Act would have been worth nothing. It might, indeed, have been, in time, a danger rather than a benefit to the profession. Then we have also other vital principles incorporated in this Act. We are to be given the opportunity of making ourselves highly efficient. You know we have never had that before ; all the efficiency we have been able to get, we have wrenched from Fate. (Laughter.) Most of the things we have learned, we have learned with one eye while the other eye was a great deal too tired to read. This Act gives us an opportunity of defining what our education shall be to fit us as safe attendants upon the sick. (Applause.) It gives us the opportunity of defining and prescribing the education, the term, and the kind of training which we consider it right we should go through ; it gives us the opportunity of having that knowledge tested by independent examination. And then it provides after registration the opportunity of going out amongst the sick and amongst the well, as highly trained and skilled professional women with the protected title of 'Registered Nurse' (Applause.) And there are many other good things in this Act. It is short, but it is crammed full of possibilities, and it is not too narrowly drafted. We need not be tied up in knots. One great principle is, we have a right of appeal to the High Courts if we consider ourselves aggrieved. That is a just provision. What is the use of being a human being if one cannot command justice ? The Act gives us power of appeal. It also gives us what I know a large number of nurses are thirsting for—a protected uniform—one which shall be not only becoming to the nurse personally, but a uniform which will show her rank. (Applause.) I hope that, in the future, you will all have an opportunity of expressing an opinion upon this ; though whether, if you do, we shall ever come to any sort of conclusion as to what the uniform is to be, remains to be seen. (Laughter.) Anyway, we are to have a uniform, like soldiers of the King, for we are soldiers of the people. I hope the uniform will be one of distinction, and also that we shall have a badge.

"Of course, the Act is not perfect. You know the House of Commons, the 'Mother of Parliaments,' does not always put forth perfect legislation. There is such a thing as expediency. We are an expedient people—we do very well upon it—and we do not like too professional and too strict legislation ; we are a freedom-loving people. There is one feature in the Act which I know you all feel apprehensive about ; that is an undemocratic clause to which we agreed, because we realised that so much had been given to us of which we might have been deprived, that we felt the man who drafted this Act was to be trusted to give us a just Council. (Hear, hear.) We asked in the past that we ourselves might nominate our representatives on the First Govern-

ing Body—the General Nursing Council. That was a counsel of perfection to which I wish we had attained; but, as you know, when our own Bill was going through the House of Commons, it met with undeserved opposition from certain sections—and, therefore, to get an agreed Bill, it was arranged that the First Council should be appointed by the Minister, upon the nominations of the various nursing interests. And that is what is going to be done. That Council, of course, is not yet nominated, because Dr. Addison has carried this Act through at very great speed. He only brought it into the House of Commons after the Recess; and, after great expedition, it was just ready for the King's Assent a few hours before Parliament was prorogued. (Applause.) We are now waiting for the letter, which I believe we are going to have in a day or two, asking the Central Committee, to which this Society is affiliated, to nominate the nurses it desires to have upon the Council, when the Minister will consider the various nominations and make his selection. Of course, we shall all feel that our own particular nominations are the best, that nothing could possibly be better, and that if we do not get them on the Council the Council cannot do its work! And, perhaps, there may be some truth in that claim, because, after all, the people who have had the foresight to promote this movement, many years ago, and have worked at it and taken trouble in furthering it, who have studied it at home and abroad, have qualified to administer the Act. We feel that they are safe people to trust with carrying this legislation into practice. But I feel convinced that the representatives from the Central Committee, if they find themselves on a Council with others whom they do not think as wise as themselves, will sedulously avoid emphasising their convictions on that subject. (Laughter.) We are indeed happy in meeting together to-day to acclaim the passing of Acts for the State Registration of Nurses, the one aim and object of this Society." (Loud applause.)

#### THE ARRIVAL OF THE MINISTER OF HEALTH.

DR. ADDISON, Minister of Health, then entered the hall, accompanied by Sir Robert Morant, K.C.B., and was accorded a very enthusiastic reception. He was welcomed by the Chairman and took his seat on her right hand on the platform.

#### VOTE OF THANKS TO THE RIGHT HON. CHRISTOPHER ADDISON, M.D., M.P., P.C., MINISTER OF HEALTH.

The CHAIRMAN said:—

"Colleagues and Friends—

"Owing to the signal honour which has been conferred on our meeting by the presence of Dr. Addison, the Minister of Health, and knowing the great value of his time, we will now proceed to take the Votes of Thanks on our Agenda. In this connection I have sincere pleasure in expressing from the Chair our very deep sense of obligation

to the Minister of Health in the following Resolution:—

That the members of the Society for the State Registration of Trained Nurses, in General Meeting assembled, desire to convey to the Minister of Health, their most sincere gratitude for his skilful diplomacy in carrying through Parliament the Nurses Registration Act; and for initiating similar Acts for Scotland and Ireland; thus securing for the benefit of the whole nation this long delayed and greatly needed measure of Nursing Reform and Public Protection.

The members of this Society, who have for many years worked to obtain such legislation, desire most respectfully to assure the Minister of Health of their whole-hearted support, in helping to make the Measure one of great professional benefit and public usefulness.

"Speaking to the Resolution, I would remind you that Dr. Addison is an old friend and supporter of the organisation of Trained Nursing by the State, and that he backed our Bill—promoted in 1904—when introduced into Parliament in 1910, '11, '12, '13 and '14, and that it was only when he 'went up higher' and became a member of the Government that he wrote 'that although his interest in Nurses' Registration was the same as before,' he was unable to continue to back our Bill.

"To the history of Nurses' Registration in the past Session I need not here refer, further than to remind you that when through our peculiar Parliamentary procedure a few dissentients were able to obstruct the passage of the Central Committee's Bill—a private Member's Bill—Dr. Addison came forward and gave us a pledge in the House of Commons that he would introduce, as a Government Measure, a Bill for the State Registration of Nurses. How faithfully and expeditiously he has kept that pledge we all know. (Applause.) Here is the Act to which the King's Assent was given on December 23rd last. When presenting the Bill on behalf of the Government in the House of Lords, Lord Sandhurst said:—'I present this Bill as an agreed Measure. . . . I certainly have thought that such a result would have been well-nigh impossible, but I did not count on the magician-like qualities of the Minister of Health.'

"Those of us who have worked unceasingly for so many years to attain the great reforms which the Nursing Acts are calculated to effect, have hardly yet realised the wonderful transformation which the waive of Dr. Addison's wand will bring to pass.

"This much we may predict—that long after more popular legislation has had its day, the beneficent results of the Nursing Acts for the welfare of the community and the Registered Nurses will become more and more apparent, and the name of Dr. Addison should for all time be associated with such beneficence. The members of the Society for the State Registration of Trained Nurses—which initiated the first Nurses' Bill—in recording their gratitude, at the same time offer their help to the Minister of Health in making the Nursing Act a living force for good, in attaining higher standards of health and happiness for the

people through the ministrations of registered nursing practitioners, who are thoroughly educated, trained, tested and skilled for their responsible duties, and who are remunerated and held in the respect they deserve in the body politic.

"Long may the 'magician' at the Ministry of Health retain office, and his power in connection with the Nursing Act, which we all know will be administered by him in a just and liberal spirit." (Loud and prolonged Applause.)

The Chairman then called on Miss Isabel Macdonald, Royal British Nurses' Association, as a representative nurse, to second the Resolution.

#### MISS ISABEL MACDONALD SECONDS THE RESOLUTION.

MISS ISABEL MACDONALD in responding said:—

"Madam Chair, Dr. Addison, ladies and gentlemen, I have great pleasure in seconding the resolution just proposed from the Chair, and in expressing the pleasure it gives to us that the Minister of Health should have spared some of his exceedingly precious time in order to be here this afternoon. You nurses have briefed me well as regards your views in connection with the Nurses' Registration Act, there is scarcely a clause in it that one or other among you has not selected for special criticism, favourable or otherwise. On one point however, you have all been unanimous when you have come to me to ask questions, and to discuss the Act, and that is your appreciation of the ability and goodness of Dr. Addison in having had an Act for the State Registration of Trained Nurses placed on the Statute Book at last. (Loud Applause). I know you have anxieties regarding certain points, you have made that very plain to me as regards what you are pleased to term 'the nominated Council,' but I am going to say to you at this public meeting, just what I have said to you personally—"You must *trust* your Minister." Look back over the last few months of the history of the State Registration movement. Remember that to-day we are met to celebrate the redemption, in an incredibly short time, of a pledge that was given you, examine your Act, and remember that Dr. Addison has handed to you the reward of all your striving and all your sacrifice, and I feel sure that you will be encouraged to have full confidence that this Council which is to shape your lives and shape the destinies of your profession will be justly constituted.

In the name of those present here, and also, Dr. Addison, in the name of the nurse members of the oldest organisation of nurses, the Royal British Nurses' Association, I have the honour to offer you sincere thanks for your gift to the profession of nursing."

#### MAJOR BARNETT, M.P., SUPPORTS THE RESOLUTION.

MAJOR BARNETT, M.P.: Mrs. Bedford Fenwick, Dr. Addison, ladies and gentlemen, it is a great pleasure to me to be here this afternoon, and to congratulate you and your Society on your success in this great movement, which has been going on for so many years. We have heard from Mrs.

Bedford Fenwick what a long night of trouble and sorrow you have passed through, and I am afraid that if you had not been like the importunate widow in the Scriptures, you might still have been waiting for the State Registration of Nurses. There were a few successes, gained at long intervals, but those successes, after all, amounted to very little so long as the Bill was a Private Member's Bill, because it is about as easy for a Private Member's Bill to get through the House of Commons as it is for a camel to pass through the eye of a needle. We had the splendid efforts of Lord Ampthill in the House of Lords, which got the Bill through in 1908, and those of Major Chapple, who got a ten-minute reading of the Central Committee's Bill in 1914. Then we had our own Bill read a second time; and it was only when Dr. Addison came on the scene and brought in a Government Measure, that we succeeded, and we claim that substantially the best features of our Bill are in Dr. Addison's Act (Applause.) And we wish the Act—for it is now no longer a Bill—every success, and I associate myself with everything which has been said by Mrs. Bedford Fenwick and by Miss Macdonald about the Minister of Health. We hope he will be long spared in office to administer the Act which has now been placed on the Statute Book. I have great pleasure in supporting this resolution conferring a vote of thanks.

#### LIEUT.-COL. GOODALL, M.D., SUPPORTS AS A MEDICAL REPRESENTATIVE.

THE CHAIRMAN: In the past, unless we had had the support of the medical profession, focussed through the British Medical Association, we, perhaps, even now should not have had a Bill through Parliament. (Hear, hear.) I, therefore, call upon Col. Goodall to say a few words from the medical point of view, in connection with this great triumph which we are now celebrating.

LIEUT.-COL. GOODALL: Madam, Dr. Addison, ladies and gentlemen, I am very pleased to be able to say a few words on behalf of the medical profession in support of this vote of thanks to the Minister of Health. As you have said, without the medical profession I doubt whether the Bill would have arrived at the stage which it has now reached. The medical profession and the nursing profession are bound up together; the nursing profession supports the medical profession; the one could not get on without the other. No one knows that more than you do, Sir, and it is the fact that you belong to the medical profession which has led you to expedite this Measure. I will not interpose any longer between you and the Minister, except to say how thankful we are that this Bill has become an Act. I am sure that if it had not been so, these controversies, which have been going on for so many years, would still have continued, because I am certain this Society would not have laid down the cudgels, and I am afraid there has been a good deal of strong opposition to it becoming law. I have

much pleasure in supporting this vote of thanks to you, Sir.

THE CHAIRMAN: It is not necessary for me to read this resolution to you again. Having heard it, and also the speeches which have been made in support of it, I ask you to pass this Vote of Thanks to the Minister of Health by acclamation.

Amidst loud and prolonged applause the chairman offered the Vote of Thanks to Dr. Addison.

#### THE REPLY OF THE MINISTER OF HEALTH.

THE RT. HON. DR. ADDISON, M.P. (Minister of Health): Mrs. Bedford Fenwick, Miss Macdonald, Major Barnett, Dr. Goodall, and ladies, I thank you very much indeed for your vote of thanks. It is very unusual. (Laughter.) As a matter of fact, it is the first vote of thanks I have ever had in my life. (Loud applause.) The last thing a Minister expects is thanks. Criticism is our daily bread: at all events, we have to thrive on it as well as we can, for that is all we get. (Laughter.) Therefore, I regard this occasion, Mrs. Bedford Fenwick, not only on its own merits, but from the peculiar personal experience which it presents, as unique. I would, however, respectfully congratulate you and this Society on a good finish, so far as the Act is concerned, to their long, persistent, patient and difficult labours. (Hear, hear.) I know that, in season and out of season, Mrs. Bedford Fenwick pressed this upon us when I was a private Member, and I was lost in admiration of her pertinacity. (Laughter and applause.) But without pertinacity in Parliament, as a rule, little is achieved. It has been a very long struggle, and when we look back upon it, I myself wonder what it has been all about, because the thing has seemed so obvious—(Applause)—it has seemed to me all along an essential, if we were going to secure the Nursing Profession upon a properly organised basis upon which it could develop, so as to fill, in a proper and adequate manner, the measure of service which the community might expect to receive from it. This is one of those Acts, small in itself, which attracts, necessarily, very little public attention, but it is one of those small but fundamental Acts out of which great results, in time, must come. And it is, no doubt, with a full recognition of that fact that your patience and pertinacity have been exerted. As Mrs. Bedford Fenwick has mentioned, we managed to get it an agreed Bill, but I should like to say, quite frankly, that that result would not have been achieved had it not been in the first place, for the leadership and help of Major Barnett and some other Members—(Applause)—and that of Members of the Other House who were associated with a Bill of a different kind on the same subject. It is largely to the help of these gentlemen that the rapid progress of the Bill was secured, because it was an understanding, both in your Council and with others, that the Government would give facilities for the Bill if we could get one that was substantially agreed. Therefore we had, in the first place, to secure one, so that I could say to the Cabinet that it was a substantially agreed Bill.

That was the difficulty, and my colleagues saw to it that it was removed, and, given that assurance, it had an easy passage through the House. And I would like to pay a tribute to the wide vision and statesmanship of those in the different parties with whom we negotiated. Although it is exceptional to mention civil servants, I only want to tell you, ladies, lest in any way you might think that I did it, that the major part of the departmental work I saddled on the shoulders of Sir Robert Morant. (Applause.) Well, now, this is an essential Bill, because you have all recognised—that is why you struggled for it—that the nursing profession hitherto in this country has not played the part that it might play in our health services. And, so far as I am concerned, so long as I am at the Ministry of Health—and I hope that will be quite a long time—(Applause)—I intend to push forward the measures necessary for making an improved Nursing Service in the country. (Applause.) And I want to say at once, both to nurses and to those who are responsible for their training and for their payment, that I regard it as essential that the Nursing Profession shall be a properly paid profession. (Applause.) That is essential if we are to get a sufficient number of good, well-trained recruits. We need a great increase in our nursing facilities throughout the whole country, and greatly in our rural areas, and a proper development of our health services is impossible without it. It is for this reason I regarded it as a duty, as soon as possible, to get a Nurses Registration Act on the Statute Book. And this, ladies, although the foundation of the labours in this particular regard, is only the first step; we want more trained nurses, we want them more freely available in our country districts, and widely throughout the country, in our various services. And with respect to their qualifications and other matters, it will be for the Council that will be set up to get to work upon important preliminary matters without delay. As your Chairman has told you, you have been good enough, in the Act, to trust your fortunes to a great extent, to the Minister of Health to deal fairly in setting up this first Council, and we will do our best to be fair. (Applause.) But the first essential of the Council which I am about to set up, in my opinion, is this—that it shall understand its business. (Applause.) Therefore, I do not propose to make it particularly an ornamental Council—(laughter)—it will require to be a working Council, well constituted, and with a good and generous representation of people who have themselves been "through the mill." (Loud applause.) Well, I believe I am right in saying that letters have been prepared—and I think they have gone out—to various bodies—of course, yourselves—asking for suggestions in respect of the membership of the Council which we are about to set up. And, as I explained before, as the responsibility is mine, I must exercise it, if I can, without fear or favour. (Hear, hear.) Therefore, we shall endeavour to secure the kind of Council that I have indicated, and,

of course, to attach the greatest possible weight to the opinions of organizations like this and others that are qualified to give advice. But I am not prepared to say that I shall accept every nomination—(laughter)—nor am I prepared to say I will not go outside those nominated if it seems to be required, because, of course, owing to the lack of consultation between the different parties, it may well be that some class of experience has not been included. But we will do our best, ladies; we will get it going quickly, and when it is set up every effort of mine will be devoted to seeing that its business is conducted in a manner which I am sure will be satisfactory to the profession it has to represent. But, finally and always, this Council and its success, and the success of all proposals that we make with regard to the Nursing Profession must depend upon an active and an instructed public opinion in that profession itself. (Applause.) Therefore, whatever you may do in the future, I hope that you will not abandon the experience which you must have gained, the allegiance which you must have gathered around you, because I believe it is essential for the benefit of the Nursing Profession, as it is of every other, that you should gradually arrive at some arrangement which will provide for you an instructed body who will be well informed of your requirements, and who can be turned to for advice and suggestion if necessary. For, speaking of the fellow profession of medicine, I do not hesitate to say that it has been a serious disability to the medical profession in times past, and even now, that, somehow or another, we have not managed to evolve a body which the whole mass of the profession or substantially the whole, will regard as their trusted representatives, competent to speak for them. Because—let us make no mistake about it—the time has come when learned professions, competent to minister to the needs of the people, will have to enter into partnership, or co-operation, with the State in ministering to those needs in an organised and properly directed manner, with the view of securing that they are properly met. (Hear, hear.) And I think that the experiences of the war, and the growing education of our people have taught us that we can achieve great things with regard to health and the prevention of disease if we take properly directed and well-organised steps for doing so. And therefore, whether they be charged with the responsibility of seeing this work done or not, it is a duty which the community will cast upon any Government to improve our health services of all kinds from now onwards. And it is on that account, and because of the various considerations that I have mentioned, that I welcome the passage of this Act, and the setting up of this Council. And I do thank you, ladies, most deeply for your hearty reception and generous thanks; and I shall ever remember this occasion, as I said at the beginning, as unique in my political history. (Loud applause.)

THE CHAIRMAN: It is altogether an unique occasion, not only to the Minister, but to us too.

Dr. Addison then withdrew, the audience rising and cheering him heartily.

THE CHAIRMAN: We have listened to a most inspiring address, and I am sure we are all delighted to have had the Minister of Health with us on this great occasion. We are still considering votes of thanks. If it is unique for the Minister to receive one, it is not an unique experience for nurses to express their gratitude. I therefore call upon Councillor Kent to propose a vote of thanks to Major Barnett, M.P.

#### VOTE OF THANKS TO MAJOR BARNETT, M.P.

COUNCILLOR BEATRICE KENT: Madam Chair and Fellow Nurses, I beg to propose:

That the members of the Society for the State Registration of Trained Nurses desire to convey to Major R. W. Barnett, M.P., their warm appreciation of the services which he has rendered to the Nursing Profession, in generously placing at its disposal the place won by him in the ballot in February last, and for bringing in the Nurses' Registration Bill.

The members desire to place on record their opinion that it was this generous action upon the part of Major Barnett which brought Nurses' Registration into the sphere of practical politics, and has resulted in placing the Nursing Acts upon the Statute Book of these Realms.

I suppose I have been chosen to perform this very pleasant duty of proposing a vote of thanks to Major Barnett because I happen to live in his constituency, and I happen, also, to have the pleasure of his acquaintance. I would like to thank him, first, for his kindness in coming here this afternoon, because, although Parliament is not sitting, I believe Major Barnett is always a very busy man; secondly, and chiefly, I wish to thank him, in my name and yours, for his great services in helping us in the last stages of our great campaign, the last act, and the most important, in our long-drawn-out drama. We know perfectly well how hard Major Barnett worked on our behalf when he was in charge of the Private Member's Bill—(Hear, hear)—and how persistently and consistently he safeguarded our interests. And we very well know, too, it was no fault of his that that particular Bill was not on the Statute Book. But perhaps we do not all know quite so well—though we can pretty well guess—that he has worked behind the scenes very hard during the passage of the Minister's Bill through the House—the Minister has admitted it, so I can endorse it. It was my pleasure and privilege to be in the House of Lords and witness that great historic ceremonial of the Prorogation of Parliament, associated with the Royal Assent being given to those 45 Bills, three of which interested us very much. I also witnessed the preliminary ceremonial when Black Rod, the Gentleman Usher, proceeding with the Mace and a small escort from the House of Lords to the House of Commons, summoned them for the Royal procession, and their recession afterwards. And I seem to hear still the echo of those words, "Hats off, strangers!" in honour of the Representative of the King. And I think, with a little stretch of imagination, we might adapt those words to our

own case, and I might say I salute Major Barnett and, metaphorically, I take off my hat to him.—(Applause)—and assure him, in my own name and yours, that he will henceforth be remembered as the nurses' very good friend. (Applause.)

MISS HULME: I have very great pleasure in seconding the vote of thanks to Major Barnett for his kind services. I feel sure the nurses will agree with me when I say he will go down to posterity with the title "Defender of the Nurses' Charter and Gallant Champion of their Rights and Liberties."

The vote was carried by acclamation.

#### MAJOR BARNETT, M.P., RETURNS THANKS

MAJOR BARNETT, M.P.: Mrs. Bedford Fenwick, Councillor Beatrice Kent, ladies and gentlemen, I really have already contributed my share this afternoon, and I am being thanked when the thanks ought to have gone to another quarter. I hope we have not come to the end of the votes of thanks, for the real thanks ought to go to your Chairman, who has so splendidly fought the battle of nurses' registration through good report and evil report, not only for the last 17 years, but for 13 years before that—if she is old enough to have carried it on so long. (Laughter.) This matter has proceeded in stages. When, in 1908, we were successful in getting the Bill through the House of Lords, it was a great step, that one of the Houses of Parliament approved the Bill. But the House of Commons is a more difficult proposition: it is more difficult to get a Bill through there, I think, and it was so even in those days. Although that Bill was read under the Ten-minutes' Rule, just before the war, it was only the First Reading, and I think it was a very great advance when, on March 26th last, we got our Bill read a second time in the House of Commons, because the House of Commons does assert itself, even against other branches of the Legislature. I think the criticism to which our Bill was subjected in the House of Commons—which directly represents the people—is another evidence of the zeal, sometimes the mistaken zeal, which representatives of the people insist on showing. I regard it as a great honour and privilege to have been associated with this great reform. I had all the luck of the ballot: I do not think it was anything very much to my credit that, having promised our President, and Councillor Beatrice Kent, that if I were successful in the ballot I would put down the Nurses Registration Bill, I carried out my promise. All I can pretend to have done is simply to have kept my promise, to have thus been a humble instrument of bringing about this reform. It was long overdue. The effort has been continued seventeen years, and if it had not been for the splendid courage of Mrs. Bedford Fenwick, some of you must still have been feeling that "hope deferred which maketh the heart sick." You have now got your Act, and I think it is a good one, and I know Dr. Addison intends to make it a success. The Nursing Profession is now established on a firm basis for all time in this

country. I thank Councillor Kent very much for all the kind things she said about me. I do not deserve half of them, and I thank you, ladies, for the kind way in which you have received them. (Loud applause.)

I desire in this connection to record the very great service in this matter of a colleague, Sir Samuel Scott, the Member for Marylebone, who was in charge of the Nurses Registration Bill before I was fortunate enough to get a place in the ballot. He gave me the very kindest assistance in carrying the Bill through Committee, and I should be sorry for you ladies to think I failed to recognise and acknowledge those fine services. (Applause.)

#### THANKS TO ABSENT FRIENDS.

THE CHAIRMAN: I now call upon Miss Heather Bigg to propose an inclusive vote of thanks to several of our most helpful friends: Lord Amptill, who is Chairman of the Central Committee for the State Registration of Nurses, and has been our consistent friend for many years and got our Bill through the House of Lords in 1908, and who did a great deal last Session to enlighten noble Lords on the fallacies of a rival proposition. We also wish to thank Lord Sandhurst, who presented the Bill in the House of Lords for the Government last Session. And do not let us forget our very kind and good friend Dr. Chapple. He had no luck in the ballot, but he was very pertinacious, and a very good friend to us for the four years he had charge of our Bill. We desire also to place on record our gratitude to Major Sir Samuel Scott, M.P. I am sorry we do not seem to be able to name many women who have come forward to help us. I am a strong woman's woman, but I am bound to say that those who are not professional women have with very few exceptions, stood aside markedly with regard to this great reform. The support we have had from the medical profession, we know very well, has come from the men. But there is one name I must mention—that of Mrs. Ogilvie Gordon, the President of the National Council of Women of Great Britain and Ireland, who has shown a very intelligent interest in this nursing question. I think we owe her a sincere vote of thanks. She is an exceedingly brilliant woman, and her support was of great value to us. Then there is the British Medical Association—(Hear, hear)—which has greatly assisted us. I call upon Miss Heather Bigg to propose the vote of thanks.

MISS M. HEATHER BIGG proposed and Miss E. B. KINGSFORD seconded the votes of thanks to Lord Amptill, Lord Sandhurst, Major Chapple, Major Sir Samuel Scott, Mrs. Ogilvie Gordon, and the British Medical Association, which were agreed to with applause.

#### VOTE OF THANKS TO THE CHAIRMAN AND THE HON. SECRETARY:

A very warm vote of thanks to the Chairman, which, she said in her reply, must include Miss M. Breay, without whose help the work credited



to her could not have been accomplished, was passed with three cheers, and the audience here sang with right good will, "For She's a jolly good fellow."

#### THE FUTURE OF THE SOCIETY.

THE CHAIRMAN then said:—It may be considered that as the Act is passed there is nothing more for this Society to do. But I assure you our work is only just beginning, and the Minister himself hinted that to you. When the Council has been appointed a stupendous piece of work for the benefit of the community must be organised and carried out. We have realised the importance during these years of acquainting ourselves with politics, and because nurses have been brought into a registered profession is a reason why they should realise their political responsibilities more in the future than they have done in the past. I am not at all inclined to regard the work of our Society as finished, and I propose that we refer the matter to our Executive Committee to consider what should be the future activities, if any, of this Society, and to report to our next annual meeting. This was agreed.

#### THE THANKSGIVING SERVICE.

MISS BREAY announced the Thanksgiving Service for the Nursing Acts at St. Martin's-in-the-Fields, on January 23rd, at 7.15 p.m.

The meeting then terminated, the audience greeting their officers and one another in a spirit of cordial good fellowship, which augurs well for the future solidarity of the Nursing Profession.

### COLLEGE OF NURSING, LIMITED.

We are glad to note that the College of Nursing, Ltd., is celebrating the passing of the Nursing Act, and that Sir Arthur Stanley, Treasurer of St. Thomas's Hospital, and Chairman of the College, will, together with the Council, be At Home at the Royal Automobile Club, W., on Thursday, 15th January. Lord Sandhurst and Dr. Addison, Minister of Health, will speak.

It is very satisfactory, that as the College Council and its Register were not incorporated in the Act—thus giving it precedence over the pioneer Nurses' Organisations, and making it the Governing Body of the Nursing Profession, as provided in the College Bill—the College is prepared to accept and welcome the Government Measure.

The College will now realise where it stands, and what its future activities can be, and it should without delay concentrate its energies in promoting schemes of practical nursing education in support of the various curricula to be defined by the General Nursing Council.

### IRISH NURSES TO CELEBRATE STATE REGISTRATION.

Miss Huxley has issued invitations to a Dinner at the Bonne Bouche, 51, Dawson Street, Dublin, to celebrate the passing of the Nurses' Registration (Ireland) Act, on Tuesday, January 27th. We feel sure this will be a delightful occasion, and deeply regret we are unable to accept the invitation to attend, which we have had the honour to receive. All good wishes for the huge success Irish wit and gaiety are sure to command.

### LEGAL MATTERS.

#### EX-V.A.D. PLEADS GUILTY TO CHARGE OF THEFT.

A strange story was told at the Marylebone Police Court recently, when Monica Bowie, the wife of a Lieutenant in the R.A.F., was charged with the theft of £60, to which she pleaded guilty. Her solicitor stated that she left school in Canada at the age of 17 "to become a V.A.D. nurse," and while serving in France was wounded in the head and arm. Her husband, who was called as a witness, said he met his wife on the hospital ship Delta which was torpedoed, and married her last November. They were to have sailed for South Africa that afternoon. The magistrate remanded the accused to have the state of her mind reported on, saying that without positive medical evidence he should regard the plea of ill-health which had been put forward with some scepticism. If her statement is true, why was a school girl of 17 permitted to come from Canada to Europe as a V.A.D. and employed as described? Nothing could be more unsuitable.

#### V.A.D. NURSE BOUND OVER.

At Willesden last week, Thelma Clarkson, a V.A.D. nurse, was bound over on a charge of obtaining money by false pretences. In two cases, it was stated, she took men to hospital, persuading them that owing to the state of their health an operation was necessary. In the first case she obtained a fee from the man's wife after giving a graphic description of an operation that never took place, and in the second case she drew the man's wages after taking him to hospital.

#### THE STORE CUPBOARD.

When you order Bovril for the store cupboard, please remember to order bottles, not cubes, as it is not obtainable in the latter form.

Then, stock a bottle of Nujol (ANGLO-AMERICAN OIL Co., LTD., 36, St. Anne's Gate, S.W. 1) which prevents constipation by acting mechanically.

And, lastly, do not forget to keep always by you some "Shell" Brand Floor Polish (ARCHD. H. HAMILTON & Co., Possilpark, Glasgow), the first polish on the market, and still holding its place in the forefront.

## APPOINTMENTS.

### MATRON.

**Royal Albert Hospital, Devonport.**—Miss Caroline Webber, R.R.C., has been appointed Matron. She was trained at the Coventry and Warwickshire Hospital where she also held the position of Sister, and has been Night Superintendent at the Radcliffe Infirmary, Oxford. Since 1914, she has done two years' service overseas, and has been Matron for two years of the Officers' Hospital, in connection with the 3rd London General Hospital.

**The Infirmary, Kingston-on-Thames.**—Miss Anna Sinclair has been appointed Matron. She was trained at the Western Infirmary, Glasgow, and the Brighton Hospital for Women, and has been Sister in Charge at the Fort George Garrison Infirmary, Matron at the Sanatorium, Peebles, Matron of the Great Barr Hospital, and, during the war, Matron of hospitals at Weybridge, Exeter, and Kilmarnock.

### SISTER.

**North Lonsdale Hospital, Barrow-in-Furness.**—Miss Constance Passmore has been appointed Sister. She was trained at the Victoria General Hospital, Barnet, and has been Masseuse at the Second Northern General Hospital, Sister at the West Suffolk Hospital, Bury St. Edmunds, and Temporary Sister at the West London Hospital, Hammersmith.

**Eccleston Hall Sanatorium, St. Helens.**—Miss Rebecca Lineham has been appointed Sister. She was trained at the Peasley Cross Sanatorium, St. Helens, and the Royal Devon and Exeter Hospital, and since completing her training, has worked on its private staff.

### SUPERINTENDENT SCHOOL NURSE.

**Notts. Education Committee.**—Miss Mary Shaw has been appointed Superintendent School Nurse. She was trained at the West Derby Union Infirmary, Liverpool, and has been Health Visitor and School Nurse under the Lincoln County Council.

## PRESENTATION.

The resignation of Miss Annie Smith, Matron of the Kingston Infirmary, is widely regretted by all sections of the Infirmary Staff; and, before leaving the institution, she was the recipient of many gifts, testifying to the affection and esteem in which she is held, as well as of numerous letters from former nurses, and from patients who have been cared for in the institution. Past and present members of the Infirmary staff presented cutlery, and silver and other table requisites; the domestic staff a cruet stand, the workers in the laundry a handsome Wedgwood biscuit box, and the "male staff" a cake basket. We much regret to learn that Miss Smith's resignation is caused by ill-health, and hope that the rest and care in a nursing home which she is at present receiving, will speedily result in its re-establishment. Miss Smith has done excellent work during her term of office at the Kingston Infirmary, and the reputation of the Nursing School stands high. She was also President of the Nurses' League, in which she took a keen interest.

## OUR FOREIGN LETTER.

### A VISIT TO CRACOW (OLD CAPITAL OF KINGDOM OF POLAND AND CAPITAL OF AUSTRIAN POLAND).

By Miss JENTIE PATERSON.

Poland has no rolling stock of her own, but uses a conglomeration raked from "awe the airts the wind doth blow," consequently, the trains are slow and crowded; added to this, coal is short and that used of poor quality. The *express* trains stop at most stations, the ordinary ones in between as well; that and the price of the ticket seem the only difference.

We started for Cracow from Zawiercie, at 7.30, one glorious Sunday morning. It was the Feast of the Anniversary of the Virgin Mary. Already crowds of gaily dressed peasants were *en route* for Czeszochowa, the Lourdes of Poland. We were told that, in peace time, the pilgrimage was made on foot; considering the congested state of the railway—Poland was fighting on four fronts—I felt they might well have continued the custom. As we patiently waited for our train, three trains passed through, going towards Czeszochowa; one presented a never-to-be-forgotten sight—fully packed compartments, so full that the doors hung open, whilst people of all ages rode on the roof of the carriages or on the footboards, hanging on to any available projection! As the train moved slowly out, it reminded one of a gum fly paper which had justified its existence.

After three hours' wait, our train arrived, and having first-class tickets we managed to get seats. A few stations down the line a young commissioner of police joined us, and immediately a notice reserving the carriage was posted on the window. This habit has its advantages, if you are in the carriage before the notable arrives, but its disadvantages will be obvious later. The country south became more wooded and undulating and eventually, after three and a-half hours of intense heat, we sighted the towers of Cracow.

We had been warned that hotel accommodation was well nigh impossible, but nothing daunted we sallied forth prepared to tip well. We could afford to, as we received 150 Polish marks for £1, and 38 Polish kroner (they still count in Austrian values) go to the 20 marks.

Hotel after hotel turned us down, and the other two began considering where we might have to spend the night. I held that such doubts jeopardised our chances and refused to consider the proposition; eventually, we struck an hotel where the Jew "portier" suggested the possibility of one room in a few hours. I immediately clinched, though the fact that the party consisted of two ladies and a medical man, might have deterred me. While we waited for the refusal of the room, we lunched in the restaurant and noticed numerous Allied officers. Presently, a genial British general came over to our table.

He was returning from Silesia—one of the Enquiry Commission—and assured us the "portier" had their rooms to let, as they had decided to push on. We descended on this son of Shylock and demanded a room, quoting our source of information. Can you ever catch a Jew? He assured us in broken English that the room had only been reserved so that the general might wash his inside! and that the price was—exorbitant! But we ascended and beheld a palatial apartment, with a spacious dressing-room, which we allotted to our medical companion. We heard next morning that, waking early, he glanced upwards, and perceiving blue sky and birds, thought he was on active service again and his tent had been blown over; when more awake, however, he realized the sky was only high art.

Cracow is distinctly mediæval, and such a delight after Warsaw. One saw green copper domes and dull red tiles, flat, scalloped or bevelled; spires innumerable and diverse. You stepped right back into history and revelled in mellow colours and tales of romance and daring. In the market-place stands the old Tower from which the Trumpeter has called the hours for hundreds of years. Near by is the Marien Kirche, with its graceful but unequal spires; while opposite, on the Museum wall, hangs the knife which finished off the brother whose spire was the more beautiful!

The Wawel is the sight of Cracow; it is their Kremlin—cathedral, palaces, clergy-houses, all on one hill, which rises from the banks of the Vistula. The towers, spires and domes of the cathedral and chapels are a series of artistic triumphs, culminating in the golden dome of King Siegmund's sepulchral chapel. Inside the cathedral the tombs of Polish kings were carved in terra-cotta-coloured marble, by Thorwaldsen. French tapestries captured by the Polish King Sobieski from the Turks at the battle of Vienna decorated the nave; while, at its upper end, a massive wrought-iron coffin, enshrined, was used as an altar. The side chapels were rich in old metal, quaint in design and shape. The great bells commanded attention, especially when one realized that the Warsaw ones were all commandeered. The Austrians were much more lenient and liberal-minded than the Germans, though the latter tried not to alienate Polish good will. They are hated nevertheless. The largest bell was cast by Siegmund after the victorious end of his wars, out of 300 weapons, and we were told was drawn to the cathedral by 300 oxen.

The evening sun was striking the Tatry range of the Carpathians eighty miles south as we stepped on to the terrace high above the Vistula, we watched the lowering snow clad peaks catch the slanting rays, light up, glisten, and gradually fade into cloudland.

Next morning we were abroad early, as we wished to see the shops before they closed for the feast day. Things generally were cheaper and more abundant than in Warsaw. I saw a nice fur coat 380 m., which was not a long price to pay.

Bread was more plentiful and cheaper than at Zawiercie, but, of course, the harvest was then being utilised, and the conditions at Zawiercie improved, though the supply depended greatly on the railway.

We made our way early to the Wawel, as we had heard rumours of a procession, also we had the Palace to visit. The latter we regarded more as a duty, as the building shown us the previous evening did not look interesting. Great was our delight to find we had been misinformed, and an architectural treat awaited our inspection. Imagine a courtyard, entered from a deep archway, and on three sides of you balconied and pillared white walls reflecting the glare of the morning sun. Deep shadows were cast on one side by the overhanging teak roof—a joy in itself—while on the other side one saw recently-uncovered mural paintings of the fifteenth century.

The interior of the palace was being renovated; for years it had been an Austrian barracks. Two of the restored rooms have most beautiful ceilings, heavy crossbeams with quaintly-carved metal bosses, and between the beams rich colour and heraldry. Sixteenth century mural paintings formed the frieze, and the heavily-carved stone doorways have been freed from the concealing whitewash of ages.

The fourth side of the courtyard was occupied by an eleventh century chapel, which had only recently been unearthed. Charts showed how it had gradually been covered over, till eventually a hospital was built over it. The ground level had, of course, risen during the passage of centuries, and the windows of the now excavated church looked into the "area" which has been dug round them. During the morning we walked out to one of the forts, but the weather became sultry, and we did not get the view we hoped. Still it gave one a good idea of the scene of the Russian advance which passed Cracow within about thirty miles. The Vistula was alive with boys bathing and flat-bottomed boats containing many patient fishers, but we did not see any catches!

The churches in Cracow are very numerous, all more or less, externally at least, claim attention if only because of colouring. Several, such as the "Kirche des heiligen Stanislaw," have miraculous stories attached to them.

Towards five o'clock we wandered into the Marien Kirche again, just in time to see a most interesting religious procession. Interesting to us from the point that almost all the processionists were women and children. We were surprised to see them given such an important position in a Roman Catholic Church ceremony.

Cracow was full of gaily-dressed peasants—men and women. Corals betoken the social grade of the peasant. The highest social distinction is notified by wearing rows of tooth corals; next come cut corals, and finally round corals. The custom is for the eldest daughter to receive her mother's corals with an extra row on her wedding day, therefore the number of rows as well as the

quality of corals is the social high water mark. Many peasants have parted with their corals during the war, and replaced them in some cases by gaily-coloured but cheaper beads.

Despite the warning of the Portier our hotel bill, exclusive of meals, came to only 10s. English money—the rate of exchange was, of course, responsible for this. Tipping in Poland is arranged by a tax of 10 per cent. on the bill. If the system is to continue this method obviates much unpleasantness, and when leaving hotels, is much cheaper than our way of starting with the chambermaid and finishing with the lift boy.

(To be continued.)

### TRUE TALE WITH A MORAL.

At a recent Socialist Conference, a nurse member said that the Labour Party had done nothing for the nursing profession in the matter of inquiring into their long hours and sweated pay. Another member observed, "Well, now they have a trade union of their own."

"No thanks to you," replied the nurse, "or to any other trade union, they have got it for themselves."

### THE "ALLENBURY'S" DIET CHART.

We have received from Messrs. Allen & Hanburys, Ltd., 37, Lombard Street, London, E.C., the "Allenburys" Diet Chart, a convenient little booklet for "Instructions as to Diet," each leaf perforated, so that it can be torn out. On it is printed all the principal articles of diet likely to be ordered. Any not to be included in a patient's diet can then be crossed out, and anything underlined is to be regarded as an indication that it must be taken sparingly. Space is also left for "Extras and Remarks."

It is a most convenient chart, which takes up so little space that private nurses would be well advised to carry one with them. Messrs. Allen & Hanburys will be pleased to send one of these charts free of charge to any nurse on application.

### COMING EVENTS.

January 17th.—Meeting Central Committee, 431, Oxford Street, London, W. 4.30 p.m. Note meeting is not at 429, Strand, W.C. as usual.

January 22nd.—Central Midwives Board, Monthly Meeting, 1, Queen Anne's Buildings, S.W.

January 23rd.—Thanksgiving Service on the Passing of the Nursing Acts, for Nurses and their Friends, at St. Martin's-in-the-Fields, Trafalgar Square, W. 7.15 p.m.

January 29th.—The Matrons' Council. Winter Meeting, 2, Portland Place, W. By kind invitation of Mrs. Walter Spencer. 3 p.m. Tea 4.30 p.m.

### OUTSIDE THE GATES.

With the signing of the protocol at Paris on Saturday last, the Treaty of Versailles came into force, and peace between the Allies and Germany is restored.

His Majesty the King has sent the following message to the Lord Mayor of London:—

"In this memorable hour, when we are once again at peace with Germany, I gratefully thank the citizens of London for their loyal message. With all my heart I reciprocate their hopes, and I fervently pray that, please God, this day may be the dawn of an era in which the people of the British Empire may forever live at peace with themselves and all men.

GEORGE, R.I.

The Sex Disqualification Removal Bill, which will enable women to become barristers and solicitors, received the Royal Assent at the same time as the Nursing Acts, and the Benchers of Lincoln's Inn have already formally intimated their acceptance of the application of Mrs. Gwyneth Marjory Thomson for admission as a student of the Inn, with a view to her being called to the Bar.

Four women have since dined in the dining hall of the Middle Temple. They are the first women to be admitted as students of the Temple. From the time when Queen Elizabeth witnessed the first performance of Shakespeare's *Twelfth Night* in the hall of the Middle Temple, no woman had been allowed to remain in the hall during dinner.

On New Year's Day many friends and admirers of Mrs. Fawcett, presented her with a cheque, to mark the triumph of the Suffrage cause to which she has given the best years of her life, with the hope that it may be used entirely for her own comfort and pleasure. Mrs. Fawcett admits in a letter to her friends, that the wonderful present gave her a keen pang of pleasure, and adds, "I do bless and thank all the donors for their love which prompted it, and especially for all the strong backing they have given me in my work."

### A WORD FOR THE WEEK.

Men come to Liberty's estate;  
No birthright helps us here at need;  
Each must be taught by stern probation  
That they alone are free indeed  
Who bind themselves to serve the nation.

Owen Seaman.

The best reward for work well done is to have more given you to do.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## KERNELS FROM CORRESPONDENCE.

*Miss Emily Janes.*—"The B.J.N. has been always of great interest, and often of service to me. I am now a 'retired' person, but my interest in your cause is not lessened thereby."

*Miss M. Lord.*—"Mrs. Bedford Fenwick has accomplished a big thing. The State Registration of Trained Nurses will prove the best gift nurses have ever possessed."

*Miss A. F. Skey.*—"I am very sorry I shall be unable to attend the General Meeting. I am enclosing my railway expenses as a little help towards it."

*Miss M. Walker.*—"What a joy we all received for Christmas, 1919. I feel, oh, if I could only start my nursing life over again. Such progress!"

*Miss C. Lee.*—"Every nurse, College or no, owes a very big debt to Mrs. Fenwick, for working in season and out for her betterment. I wish they realised it more, for the younger ones will reap the benefit, and yet they seem indifferent, just taking what comes along, regardless of who did the spade work; also that they are raised from the group of unskilled labourers, to a profession with recognition."

*Member of College.*—"A friend brought me to the meeting last Thursday; it was the first time I understood the Nurses' Registration question. It was a most inspiring gathering."

*Trades Unionist Nurse.*—"I attended the State Registration meeting on January 8th. I went in a spirit of disquiet, but left the hall very greatly comforted in my mind. Those of us who have done nothing in the past to better things as the State Registrationists have done, have little right to complain of our present bad conditions, rather we deserve them. We must all do our part in the future, and by way of beginning I enclose my subscription for the B. J. N."

(A very practical beginning, and one we hope will be widely followed by many other nurses who realise the value of our independent professional voice in the Press.—Ed.)

*Miss Susan Strahan.*—"If my congratulations come late, they are none the less sincere; my sister and I are gratified to see the reward of what is practically a life's work on behalf of the nursing profession. We have already our R.B.N.A. incorporated by Royal Charter, and its existing Benevolent Funds. Why not an R.B.N.A. College of Nursing? We shall also look forward to our Nurses' Defence Union. . . . I fail to see why the fee for Registration should be less than £2 2s."

Many women who will now register, have not expended sixpence on behalf of State Registration."

*Mrs. Lingard (née Kelly) Wiborg, Finland.*—"Congratulations on State Registration."

*American Nurse.*—"In politics, you are developing the newest forms and best adapted to the modern age. I firmly believe myself that alliance with Labour is not only logical and abstractly sound, but that it is going to come very fast. If I am not mistaken, the new Belgian Nurses' Association is very much on these lines."

*Anxious Matron.*—"I do hope the General Nursing Council, when it gets to work, will be able to do something to get in the right type of probationer. Of late I have found it quite impossible to supply this need."

*Miss Jane Desmond.*—"With the entry of the Nursing Acts, surely we have seen the last of charity appeals for nurses in shops and in the streets. I never pass the Nation's Fund for Nurses shop in North Audley Street without indignation. What with the high rent and salaries for the lay women who run it, a nice tidy sum must be expended which should be used for the purpose for which the money was extracted from the public. When will this Fund condescend to issue its audited accounts?" [It is high time these accounts were available. The Fund is a War Charity, and there is not the slightest excuse for privacy concerning its financial affairs.—Ed.]

*Co-operation Nurse.*—"I enclose papers, the suggestion to deprive us of our residential Club in Langham Street is very disturbing. I always imagined myself a Member of the Co-op., but find I am no such thing. Can nothing be done to give us some security of tenure?" [We hope to find space to deal with your controversy next week.]

## NOTICE.

The Editor will next week discuss the making of Rules and the Duties and Powers of the General Nursing Council, set up in the Nurses' Registration Act. She regrets space is not available in this issue.

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*January 17th.*—An anastomosis has to be made between the stomach and jejunum. How would you prepare the patient for four days before the operation?

*January 24th.*—What do you know of anthrax, and of the methods of infection with this disease? What are the nursing points to be observed in caring for a case?

## HOW TO HELP THE B. J. N.

1. Subscribe for it.
2. Send news to it.
3. Patronise our advertisers.

# The Midwife.

## A SUGGESTED SCALE FOR FEEDING INFANTS ON DRIED MILK.

DR. VYNNE BORLAND, M.B., Ch.B., B.Sc., Glasgow, D.P.H.Lond., Assistant Medical Officer of Health, Willesden Urban District Council, contributes to the *Lancet* a very interesting article on the above subject. He writes:—

"It is now generally recognised that many diseases of early childhood, and in some cases of later life, are due to over-feeding at an early age. This refers more particularly to babies artificially fed than to breast-fed babies, and since in later years dried milks have come very much into use for baby feeding there is a greater tendency towards over-feeding.

"While attending the consultations at an infant welfare centre one is soon struck by the great differences in weight of babies of a similar age. If they are bottle fed one finds, with very few exceptions, that, although there may be as much as 3 lb. or 4 lb. difference between their weights at the same age, they are receiving practically the same quantity of milk in twenty-four hours. The reason for this is that feeds are given according to the age of the child, the weight being considered only in a haphazard way. This occurs more particularly in those cases that are fed on the various "baby foods and dried milks" which bear the instructions for feeding on the covering label. This matter becomes more important under the present difficult conditions when, owing to the decreased value of money, a large number of nursing mothers go out to work in order to lessen their financial troubles, and consequently their babies are no longer breast fed. At the same time, owing to the scarcity of fresh cows' milk, the demand for specially-prepared milks has very materially increased, and many local authorities have adopted "dried milks" as the most convenient form of distribution in connection with a welfare clinic, either at a cost price, or free in necessitous cases.

### "A PLAN FOR FEEDING BABIES IN ACCORDANCE WITH THEIR WEIGHT.

"Taking these facts into consideration, it is desirable that a more appropriate method of arriving at the necessary feeds should be adopted than by calculating quantities of feeds according to age alone. Therefore it is suggested here that it would be an infinitely better plan to feed a baby in relation to its weight. This method has produced very satisfactory results in Willesden, where it has now been practised for over two years. . . .

"The present scale is based chiefly on a full-cream dried milk which has been modified to resemble human milk, but others not so modified have answered satisfactorily when given according to scale.

"If the suggested scale of feeds is to be adopted it is essential that it should fulfil the following con-

ditions:—1. It must be practicable. 2. It must be easily understood by doctors, nurses, mothers, or any person having charge of the baby. 3. The calculated amount of feed must produce a satisfactory gain in weight per week. 4. The stools must remain normal. For the number of level teaspoonfuls of dried milk to be given in 24 hours the formula is as follows:—

"Below 7 lb. add 9 to weight = up to 16 level teaspoons in 24 hours.

"From 7 to 16 lb. add 10 to weight = 17 to 26 level teaspoons in 24 hours.

"From 17 lb. upwards take second figure as one feed = 28 teaspoons upwards (four feeds in the 24 hours)."

## THE TERM OF TRAINING FOR NURSE MIDWIVES.

Dr. Elizabeth Sloan Chesser appeals in *The Times* to "girls who are being demobilised from the various military and Government services and who would like to take up useful and remunerative work in the future. There is, she says, an urgent need of young women to train as nurse-midwives for urban and rural districts all over the country. Girls can, indeed, receive their year's training free of all expense (living and educational) if they will agree to serve afterwards at a good salary for two or three years as nurse-midwives in connection with the County Nursing Association which has trained them."

The qualification for midwives is defined under the Midwives Act, that for nurses will shortly be defined under the Nursing Acts, but it is safe to say that a year's training will not enable girls to qualify both as nurses and midwives. It is much more likely that the time of midwifery training will be raised to one year.

## INCREASED COST OF LIVING.

In view of the increased cost of living, the fee for board payable by nurses who are admitted for four months to military families' hospitals for training as midwives will be increased from 10 guineas to £15.

## BEREFT.

O, brown Earth, warm and fragrant,  
Make soft her tiny bed,  
Oh, great Winds, in the darkness  
Move gently overhead—  
Be kind, you waving grasses  
She gathered baby-wise,  
And all you buds and blossoms,  
Rest lightly on her eyes.  
Oh, mothers, to your bosoms  
Fold close and safe your own—  
My little babe is sleeping  
Beneath the stars . . . alone.

—Anna Spencer Twitchell.



# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### SOME PROBLEMS OF THE MINISTRY OF HEALTH.

Trained nurses have a two-fold reason for keeping themselves acquainted with the problems and work of the Ministry of Health. It is the Government Department which henceforth will control the public services dealing with the health of the people, and, further, the Minister of Health is the Minister who will be intimately concerned with the working of the Nurses Registration Act for England and Wales, and who will represent the interests of trained nurses in the House of Commons.

The report of an address given by Sir Robert Morant, K.C.B., to the Public Health and Insurance Committee of the National Council of Women (not expressing his own views, or those of the Ministry, but trying to show what some of the difficulties are that need to be solved), recently published in its Occasional Paper, is therefore of much interest.

Sir Robert pointed out that the formation of a Ministry of Health had made no alteration in the powers of local authorities; it had touched only the Central Departments in Whitehall, bringing together such Central Departments as were connected with Health, and which had hitherto been separate, namely, the Local Government Board, the Insurance Commissioners, certain powers of the Privy Council with regard to midwives and of the Board of Education with regard to the Health of School Children.

The important point for his audience to consider was the nature of the legislation for local bodies which would have to follow upon this union in Whitehall, and the way in which it would affect the existing local authorities. At present there was no one local body whose duty it was to look after the health of the inhabitants

of its area *as a whole*, and to make proper provision for all the requisite health services of the people on modern standards.

The transference and concentration of all the existing powers and duties of the various local bodies would not cover all aspects of public health, and a scheme was needed, governing the whole of a given city or district, which would embrace all statutory health functions, and bring also the voluntary agencies in suitable relations with them.

Sir Robert Morant put forward the question as to whether, if the Poor Law Guardians were abolished, the Rural District Councils, the County Councils, or a larger area of administration were desirable. Many people, he said, considered that a much larger area of administration was needed if we were to get rid of what they regard as the overmastering power of local vested interests.

Again, he pointed out that it would obviously not be sufficient to rely purely on *voluntary* hospitals as the responsible body for making provision for the whole needs of an area. Who should be responsible? It must be someone's duty, not privilege, to care for the sick. Then there were the clinics for special complaints, and centres for infant welfare. They must be brought near the homes of the people, but, in doing so, one would be brought up against the general practitioners, who might say that their private practice would be taken away. Again, there was at present no authority that had specifically been made responsible by Parliament for the provision and upkeep of General Hospitals, or of a comprehensive system of medical provision for an area; and the whole question teemed with such administrative difficulties that health workers all over the country should devote their minds to trying to think out a practical solution of some of these problems.

## OUR PRIZE COMPETITION.

**AN ANASTOMOSIS HAS TO BE MADE BETWEEN THE STOMACH AND JEJUNUM. HOW WOULD YOU PREPARE THE PATIENT FOR FOUR DAYS BEFORE THE OPERATION?**

We have pleasure in awarding the prize this week to Miss Lilian F. Hayward, 9, Upper Wimpole Street, London, W. 1.

### PRIZE PAPER.

As the operation of making an anastomosis between the stomach and jejunum, or gastro-jejunostomy, as it is called, is one of the most severe of abdominal operations, it is of the utmost importance that a preparation of at least four days should be carried out before the actual day of operation.

It is often thought by lay people that such a long preparation is unnecessary, but it has been proved that much better results are obtained by a thorough preparation before the operation.

The patient should be kept in bed for the whole of the four days, and the bowels well opened by calomel; of course, the dosage should be in accordance with the age and strength of the patient, but any diarrhoea should be prevented, as this is a very bad preparation for any abdominal operation. The last dose of calomel should be given two days before the operation, and on the day preceding operation a dose of castor oil may be given; if this is not sufficient to secure a complete emptying of the lower bowel, enemata should be given, and at any rate, about three hours before the operation, a plain soap-and-water enema should be given.

During these days of preparation the patient should be kept on fluids, and, for about fifty hours before operation, on nothing but sterilised milk and tea. Especial care should be taken with the teeth; they should be cleansed two or three times a day with carbolic tooth powder, and frequent mouthwashes given; any stumps or decayed teeth should be removed.

By these means—viz., aperients and enemata to clear the lower bowel, and the fluid diet, and asepsis of the mouth and teeth—do as much as possible to keep the whole of the alimentary tract as sterile as possible.

The patient may be induced to take deep breaths, as this may help to minimise the possibilities of chest trouble after the anæsthetic. It is also a good thing to suggest to the patient that he or she tries to sleep in an upright position, as most surgeons have their abdominal cases nursed in the Fowler position, and the unusual position may prove most irksome unless the patient is more or less used to it. By

these simple means the patient may realise that all that is possible to be done is being done for the success of the operation, and to keep his thoughts in a cheerful and hopeful channel.

The day before the operation the patient should have the operation area shaved, and then have a hot bath (providing he is in a fit state). Different surgeons differ in their methods of skin preparation, so it is wise, if possible, to ascertain the surgeon's wishes with regard to this matter.

The usual method is to wash the operation area and surrounding parts well with soap and water, and then to paint with iodine paint, leave to dry, and in about two hours' time to paint again, and to cover with a sterilised dressing, and bandage firmly; it is a precaution to apply the iodine rather high up on to the chest, as in many cases of gastro-jejunostomy the patient is given subcutaneous saline during the operation, and a preparation before minimises the possible chance of an abscess.

For elderly or very weak patients it is advisable that they should be given a pint of rectal or subcutaneous saline a few hours before the operation.

Nothing should be given by mouth for at least six hours before the operation; the patient should be warmly but loosely clothed, and a hypodermic injection of morphia  $\frac{1}{4}$  gr. and atropine  $\frac{1}{16}$  gr. is usually given half an hour before the operation.

As was mentioned before, it is most necessary that the nurse should exert all her mental powers to keep the patient in a hopeful state of mind with regard to the operation, for there is no doubt of the great effect the mind has over the body, and in this and all operations a nurse should bear in mind that her conscientious preparation is of vital importance, and that "well begun is half done."

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss M. James, Miss P. Thomson, Miss J. Evans.

Miss P. Thomson points out that the reason why, after an operation of this kind, the patient is propped up in a sitting position, either by pillows, or by a special bed frame, is because in this position the stomach naturally empties itself through the new opening into the bowel.

### QUESTION FOR NEXT WEEK.

What do you know of anthrax, and of the methods of infection with this disease? What are the nursing points to be observed in caring for such a case?

## THE NURSES' THANKSGIVING SERVICE.

Much interest is being taken in the Thanksgiving Service for the passing of the Nurses' Registration Acts, which is being held, by the kindness of the Rev. H. R. L. Sheppard, at St. Martin's-in-the-Fields, Trafalgar Square, London, W.C., on Friday, January 23rd, at 7.15 p.m., and on such an occasion there is sure to be a good congregation of nurses and their friends. The hymns selected are all those

doubtless a cross made of wood, which gave the name of Charing Cross long before Crundale erected the cross of Caen stone by order of King Edward I, in honour of Eleanor, his Queen, who accompanied the King to the Holy Land, and when he was wounded by a poisoned arrow, sucked the poison out of the wound, with the result that the King recovered. The body of Queen Eleanor was brought from Lincolnshire to Westminster Abbey for burial, and at each stopping-place King Edward had a



THE CHURCH OF ST. MARTIN'S-IN-THE-FIELDS, Trafalgar Square, W.C.  
Where the Nurses' Thanksgiving Service will be held.

in which the congregation can join, and the canticles will be sung to well-known chants, so that the service will be thoroughly congregational.

By the kindness of Mr. John McMaster, Churchwarden of St. Martin's, which is a Royal Parish, we are able to publish the accompanying picture of the church from his book, "St. Martin's-in-the-Fields." It is interesting to learn that the Church was sometimes called St. Martin-nigh-the-Cross at the village of Charing, and Mr. McMaster tells us that there was

cross erected. The crosses were consecrated, and bore the inscription "*Orate pro anima.*"

Major Barnett, M.P., deeply regrets that, owing to a previous engagement, he is unable to be present at the Thanksgiving Service, and has most generously sent Mrs. Bedford Fenwick a cheque for £5 5s., to be added to the offertory. As we announced last week, any surplus from the offertory after expenses are paid is to be given to the Trained Nurses' Annuity Fund.

**THE NURSES' REGISTRATION ACT.****THE GENERAL NURSING COUNCIL.**

Invitations have been issued by the Minister of Health to the Nursing Organisations mentioned in the Schedule to the Nurses' Registration Act—the Central Committee for the State Registration of Nurses, the College of Nursing, the Royal British Nurses' Association, and to other Nursing Societies, to submit names for his selection in appointing the sixteen nurses on the First General Nursing Council for England and Wales. At a special meeting of the General Council of the Royal British Nurses' Association, held on the 15th inst., the letter from the Minister was read, and action taken.

The Central Committee for the State Registration of Nurses met on Saturday, 17th inst., to receive the nominations from the constituent Nurses' Societies—the Matrons' Council, the Society for the State Registration of Trained Nurses, the Fever Nurses' Association, and the National Union of Trained Nurses. It was agreed that the lists of names submitted should, with the qualifications of the nominees, be forwarded to the Minister of Health as soon as possible.

It is very necessary that those accepting nomination should realise that if selected to serve on the General Nursing Council, much time will be required if they are to perform their responsible duties efficiently, and this will be required of them both by the Minister of Health and the Nursing Profession.

**NURSES REGISTRATION (SCOTLAND) ACT, 1919.**

The Scottish Board of Health are taking steps towards the constitution of the General Nursing Council for Scotland, established by the Nurses Registration (Scotland) Act, 1919. On the first constitution of the Council thirteen of the fifteen persons composing the Council are to be appointed by the Scottish Board of Health. Four are to be appointed after consultation with persons and bodies having special knowledge and experience of training schools for nurses, of the work of matrons of hospitals, of general and special nursing services, and of general and special medical practice, and nine of the persons to be appointed by the Board of Health must be, or must have been at some time, nurses actually engaged in rendering services in direct connection with the nursing of the sick.

The Board are anxious that the new Council should be of a thoroughly representative character, and they would welcome suggestions for membership of the Council, but all recommendations should be accompanied by a statement of the special qualifications and experience of the persons suggested for membership.

**NURSING ECHOES.**

Dame Amy Fanny Tate, of Park Hill, Streatham Common, S.W. (widow of Sir Henry Tate, Bart., founder of the Tate Gallery), who died in October last, leaving real estate of the value of £340,433, has bequeathed large sums to charities, and we are glad to note that Nursing Associations and nurses are remembered. Queen Victoria's Jubilee Institute receives £4,000; the Brixton Nursing Association, Tulse Hill, £500; the Head Nurse of the Sir Henry Tate Memorial Home, Tulse Hill, and the other nurses there, £100 each; her executors, for the doctors, nurses, and attendants at her last illness, £500. The Grand Priory of the Order of the Hospital of St. John of Jerusalem also receives £1,000.

Lieut.-Col. Goodall, R.A.M.C., Officer in Charge of the Cardiff City Mental Hospital, will have the sympathy of medical practitioners and nurses in his determination to place, where necessary, trained and certificated female mental nurses to care for male mental patients, and we hope ignorant opposition to this humane departure may not influence his Committee to revert to the now obsolete system of depriving male patients of such skilled care.

Lieut.-Col. Goodall informs us that the statement made at a meeting of the Cardiff Trades and Labour Council that during the war, when "young V.A.D. nurses, new to their work, were in the wards, incidents had occurred which had made the male attendants feel ashamed of their sex in the presence of such young girls," is entirely without foundation, and that no V.A.D.'s have been employed at the Cardiff City Mental Hospital from beginning to end of military occupation.

We are pleased to know this, and hope, as soon as the rules for the Supplementary Register of Mental Nurses under the Nursing Acts are defined, a great impetus will be given to well-educated young women, not girls, to apply for training in mental hospitals, and qualify themselves to nurse mental patients. We believe a great number of these suffering people might be cured by trained nursing skill. From very widespread evidence we learn much yet remains to be done, especially in large private asylums, to better the standard of care and nursing bestowed on paying patients.

We are glad to observe that ten years was added to the actual service of Miss Annie Smith, the retiring Matron of the Kingston Infirmary, by the Guardians, for the purpose

of computing her superannuation allowance. Both Miss Smith and her predecessor were compelled to resign because of ill-health, after years of most excellent service; and the least the Guardians could do was to agree to this motion, moved by Mr. Huckle. We regret to note that this deed of justice was opposed by Mrs. Harker.

When it is realised that the Kingston Infirmary contains more than 600 beds, to which is attached an excellent training school for nurses, and that the salary of the Matron commences at £100 per annum, rising £10 yearly to £140, we think the Board of Guardians shows a lack of appreciation of the value of trained supervision of the Nursing Department, and the Infirmary, which is far from creditable to them. The commencing salary for such a charge should not be less than £200 per annum, rising to £300.

We thought the College Council had this question of sufficient salaries for nurses in hand. We advise them to stir up the Kingston Guardians.

We greatly approve the suggestion of Mothers' Clubs, and a good beginning has been made by Nurses Ashby and Powell at Ramsgate:—

A charming little function took place recently at the Foresters' Hall, Ramsgate, when the nurses entertained a party of mothers and babies to a tea and social evening. The hall looked very bright and inviting, and there was a galaxy of lovely children and their proud mothers.

The social event was one which was welcomed by a number of mothers who are comparative newcomers to Ramsgate, and who are glad to meet other mothers as new friends. The nurses are considering the formation of a Mothers' Club, which should be a decided social gain among their patients. After tea there was an interval for baby-loving and the comparing of notes round the cheery fire, the cooing babies providing the most charming of music.

Later an entertainment was given which had been arranged by Mr. W. Palmer. Mothers and babies were presented with wee mascot gollywogs. Much to the disappointment of all present, Nurse Ashby was unable to attend owing to an accident which she sustained the previous day.

A large number of Royal Red Crosses have been awarded, mostly to V.A.D.'s. Miss Monk, Matron of the London Hospital, is promoted from A.R.R.C. to R.R.C. We hope to find space for the list in a future issue.

## HONOURS FOR NURSES.

### WAR SERVICE BY LAND AND SEA. ADDITIONS TO LISTS OF MENTIONS.

The names of a number of officers, ladies, warrant officers and men are to be added to those brought to notice for distinguished and gallant services and devotion to duty. They include:—

#### FRANCE.

By Field-Marshal Sir Douglas Haig, K.T., G.C.B., O.M., G.C.V.O., K.C.I.E., late Commander-in-Chief, the British Armies in France, in his despatch of March 18th, 1919:—

#### TERRITORIAL FORCE NURSING SERVICE.

McDowell, S./Nurse Mrs. E., 10th Gen. Hosp.

#### AUSTRALIAN IMPERIAL FORCE NURSING SERVICE.

Swain, Sister Miss H.

#### EGYPT.

By General Sir E. H. H. Allenby, G.C.B., G.C.M.G., Commander-in-Chief Egyptian Expeditionary Force:—

#### TERRITORIAL FORCE NURSING SERVICE.

Begg, S./Nurse Miss A.; Burnett, Sister Miss A.; Gallacher, Sister Miss E.; Hughes, S./Nurse Miss S. B.; Randall, S./Nurse Miss B.; Roth, Sister Miss N.

#### VOLUNTARY AID DETACHMENT.

Bestwick, Nurse Miss A. E.; Bowman, Nurse Miss A.; Dove, Nurse Miss L.; Fry, Nurse Miss E. M.; Moss-Flower, Nurse Miss M. D.; Quarmley, Nurse Miss L. M.; Rait, Nurse Miss C.

#### IMPERIAL SERVICE TROOPS.

##### EGYPTIAN ARMY.

##### BRITISH RED CROSS SOCIETY.

Brown, Mrs. B.; Comanos, Mme. C.; Fletcher, Mrs. J.; Horton, T./Hon. Lt. C.; Russell, Mrs. D.; Sharpe, T./Hon. Lt. A.; Siddall, T./Hon. Lt. A. M.; Slavick, Mrs. H.; Wills, Mrs. E. M.; Woods, Mrs. A.

#### ITALY.

By General F.R. Earl of Cavan, K.P., K.C.B., M.V.O., Commander-in-Chief of the British Forces in Italy:—

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Casswell, Sister (A./Matron) Miss M. R., A.R.R.C., attd. 1/3rd (S. Mid.) Fd. Amb., R.A.M.C. (T.F.).

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE RESERVE.

Anderson, S./Nurse Miss G., 79th Gen. Hosp.; Freeman, Sister Miss R., 79th Gen. Hosp.

#### TERRITORIAL FORCE NURSING SERVICE.

Vernon, Sister Miss M., 38th Staty. Hosp.; Willens, Asst. Matron Miss J., 79th Gen. Hosp.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## THE NURSES' OWN CLUB.

As members of my Association are aware, a scheme was inaugurated by the Royal British Nurses' Association some time ago to found a Nurses' Club, but, owing to the fact that the destinies of the nurses were being settled in the Houses of Parliament, I knew that my Council had to concentrate their energies very closely upon matters connected with legislation, and I considered that, although I had this scheme for establishing a Club in connection with my Association so much at heart, I ought not to press the matter at a time when my Council were so engrossed with questions vital to the whole future of the Profession of Nursing. Late in November last, however, I asked a few of my friends to join and help us in founding a Club such as you wished to have. These ladies have been most kind, but, knowing what I do of my own nurses, I felt that they would prefer to take the first steps themselves towards getting the money required for the inception of the Club. I therefore sent to each Member of the Corporation the following letter :—

**LETTER FROM THE PRESIDENT OF THE ROYAL  
BRITISH NURSES' ASSOCIATION TO NURSE  
MEMBERS.**

Schomberg House,  
78, Pall Mall, S.W.1.

December, 1919.

DEAR MADAM,—It has been brought to my notice how very urgent is the need for a large Central Club for Nurses, and I am very anxious that they should have this, because it would be useful to them in so very many different ways. I wish to give you all the help I can to form such a club, but I feel that the nurses themselves would prefer to start the fund required for the inception of the Club. Further, if they will do this, it will help me very much by enabling me to say to my friends, that the nurses themselves have done what they could towards getting the necessary funds to start the Club.

I am therefore writing to ask, whether you

will undertake to collect, among your friends, at least £1 towards the fund? I shall be glad if you will let me know, on the enclosed postcard whether you will do this for me? If so, I will then send you a collecting card, which is being printed for the purpose.

I shall be very grateful also, if you will do all you can to interest nurses and others whom you know, in the scheme.

Faithfully yours,

HELENA,

PRINCESS CHRISTIAN,

*Princess of Great Britain and Ireland.*

My wish is that this Club, which we are founding in connection with the Royal British Nurses' Association, should be available for all Nurses, and I shall be very glad, therefore, to hear from Members of my affiliated Societies and other nurses who are prepared to help me with the scheme. Will they write to me at 78, Pall Mall, S.W. 1?

I am most anxious that this Club should be one which the nurses can regard as their own house—as indeed a Home of their own. We suggest that it should be named "The Nurses' Own Club." I think it is very important that you should all help me to build up its Membership at once, and those who are helping me agree that the nurses who join first should have some special privileges. They further suggest that, although the Club will be available for all trained Nurses, some nurses may be so placed that they do not require or cannot make use of all the privileges afforded by the Club, and that therefore such nurses should be allowed to join as Associates, who will not participate in the benefits of the Club to the full extent that Members do. I shall be glad if nurses who wish to join, whether as Members or Associates, will fill in the coupon on page vi and forward it to the address I have given above.

I hope you will all take a really active interest in your Club from the beginning; we wish to have it founded and carried on in a thoroughly business-like way, and I have not the slightest



doubt that you will all see to it that it is made self-supporting, once it is established, especially as we intend that it will be planned and managed in such a way as to be of the greatest possible advantage to you.



*President of the Royal British Nurses' Association.*

## THE PAGEANT OF THE HISTORY OF NURSING.

The Pageant of the History of Nursing, which is to celebrate the passage into law of the Nurses' Registration Acts, will be held at the Wharfedale Rooms, Great Central Hotel, London, W., on April 15th, where it can be displayed to fine advantage. Members of the Association and others will receive with much gratification the announcement that Her Royal Highness the Princess Christian, who enters, always with such warm sympathy, into all the nurses' schemes for the development of their profession, has graciously consented to be the Patroness of the Pageant and to be present to witness its unfolding. In stately and impressive Processions the Pageant will show the evolution of the Profession of Nursing, commencing as from pre-historic times, as it presents itself, through the long mists of time, in the traditions of the Hellenic Mysteries. Then will come the section connected with mediæval history, followed by a modern section which, in its own way, will be as full of interest and as educative as any. This part of the Procession will be headed by "Legal Status" in academic robes, carrying the Nursing Act. It will be gratifying to the nurses to know that that portion of the Pageant, which is to represent their Association, is to be preceded by the large and beautiful banner they are presenting to the Corporation, carried on its pole and cross bar with their fine brass work mountings.

We shall be glad to hear from any nurses who will be willing to help us to make the Pageant a success, either by doing clerical work at the office, or by undertaking to sell tickets to their friends and to members of the public.

Further arrangements will be announced at an early date.

## TRAINED NURSES' ANNUITY FUND.

We are pleased to announce that the amount obtained from the sale of work, organised by the R.B.N.A. in aid of the above Fund, came to £140 9s. 3d. after all expenses were paid. When we add to this donations paid directly into the Fund as such, but which arose through the sale of work, the sum realised comes to close upon £200.

We regret that we were unable to acknowledge some of the work which was sent to us in the autumn as addresses were not forwarded with it. Particularly we should have wished to thank the donor of some lovely sketches in water colours. The Council propose that the nurses be asked to organise a similar sale next autumn, and we give this early intimation that it will take place, in order that they may have the more time to do work and to interest their friends.

We have also pleasure in announcing that the first Princess Christian annuity has been granted to a member of the R.B.N.A. We are only some £65 short of the sum required to complete the second annuity to be connected with the name of Her Royal Highness, and we hope that this sum will be added before the meeting of the Council, in July, at which fresh annuities will be granted. Every effort is made to promote this benevolent fund by methods that can in no way hurt the feelings of the nurses nor injure their status as members of the community, and the fact that the nurses can support their professional benevolent schemes has been most splendidly demonstrated by the large amounts which have been collected by the members of the Q.A.I.M.N.S.R., and which are vested in the Trained Nurses' Annuity Fund, the oldest Benevolent Fund for Nurses.

We would also remind nurses that, as there are no salaried officials, the whole of the amounts subscribed to the Fund go direct to sick and aged nurses except such sums as are paid for printing, the auditing of its cash books, and such incidental expenses.

## THE NURSES' THANKSGIVING SERVICE.

There is no need to remind Members of the Association that a Thanksgiving Service for the passing of the Nurses' Registration Acts is to be held at St. Martin's-in-the-Fields, at 7.15 p.m., on Friday this week. Those off duty will be only too eager to attend and take part in it.

## ROYAL RED CROSS.

Miss Fisher, of the Royal Bank House, Glamis, has been awarded the Royal Red Cross after working five years in the Military Hospitals abroad. Miss Fisher joined this Association in 1910.

## APPOINTMENT.

Miss C. Alice Barling has been appointed Superintendent of the Infant Welfare Centre at Handsworth, near Birmingham. She was trained at St. Mary's Hospital, Paddington, and was for some years Matron of the Ilford Isolation Hospital.

## OBITUARY.

It is with regret that we have to report the death of Professor Fraser of Edinburgh and of Miss Broadbridge, Miss Duxbury, Mrs. Shaw, and Miss O'Farrell, all of whom were members of the Corporation.

ISABEL MACDONALD,  
*Secretary to the Corporation.*

10, Orchard Street, W.

## A SHOCK TO THE NURSING WORLD.

The murder of Miss Florence Nightingale Shore, a nurse, trained at the Royal Infirmary, Edinburgh, and a connection and godchild of Florence Nightingale, in the train between London and Bexhill, by an unknown assailant, has greatly grieved and shocked the nursing world, and the world in general. Warm sympathy is extended to her close friend, Miss Rogers, the Superintendent of Carnforth Lodge Nurses' Home, Hammer-smith, who saw her off on her fatal journey, to be summoned a few hours later to her deathbed, and who remained with her until, still unconscious, she passed away on Friday evening, January 16th, at the East Sussex Hospital, St. Leonards. After the inquest Miss Shore's body was taken to Christ Church, St. Leonards, where a requiem service was held, attended by many nurses. The funeral took place on Tuesday, at St. Saviour's, Ealing, amidst every testimony of reverence and affection. During the war Miss Shore served in 1914 for a year with the French Red Cross, and from 1915 in Queen Alexandra's Imperial Nursing Service Reserve, being demobilised in 1919. At 24 General Hospital, Etaples, she exhibited great courage during air raids, and was awarded the R.R.C.

A Nursing Sister writes:—

"As one who had known Sister Florence Nightingale Shore as a fellow-worker in France in 1914, during some of those first never-to-be-forgotten months of the war, the news of the tragedy which ended in her death last Friday, came to me with additional shock and horror.

"We were together in a Military Hospital attached to the Xth French Corps d'Armée on the Somme. The Hospital was in a commandeered Hotel, and had as clearing station a chateau close to Arras. We were a Red Cross unit of British doctors and nurses. Some of us had been nursing our British wounded from the Battle of the Aisne during September and October, and being then sent to the Somme, were joined by other nurses, amongst whom was Sister Shore. Here, in November, 1914, our patients, with the exception of a few British, were for the most part

French soldiers, with whom were many Colonials (Senegalese and Arabs), nearly all 'grands blessés' requiring most careful nursing. Sister Shore threw herself heart and soul into her work, and I can recall not only her energy in preparation as we equipped our improvised hospital—in preparation for the first wounded—but also her absolute devotion to them once under her care. She was in charge of a ward, which, like all our wards, consisted entirely of very serious cases. That which fell to my charge was adjoining, and I well remember our meeting in some dismay in the endeavour to count our dirty ward linen in the primitive and very limited space allotted as its common receptacle; for in those early days contrivance was our watchword. Everything



SISTER SHORE, R.R.C. (right).

With patient just decorated with *Medaille Militaire* and *Croix de Guerre*.

had to be made to "do," and pressed into the service. No duty came amiss to any of us. Nor when convoys of wounded arrived could anyone be off duty, sometimes either day or night. Indeed, ordinary off duty time, brief at the best, was in those days more honoured in the breach than the observance by many of us, especially those entrusted with most responsibility, and amongst those none was more entirely self-forgetting than Sister Shore. She lived for her patients, whose grateful affection was her well earned and best reward, and we all felt deep admiration for her devotion and high sense of duty, and her consistent goodness of character.

"An admirable and most capable nurse she had worked previous to the war as a "Queen's" Jubilee Nurse. She was very proud of her

baptismal names 'Florence Nightingale,' linking her as they did to her great relative and namesake, in whose footsteps she was, indeed, a worthy follower.

"Strange irony that she who had been a 'succourer of many' should die by the hand of a brutal and cowardly assassin—and yet to those of us who have eyes to see and faith to believe, does there not come a glimpse of the apparent failure which is the greatest victory, and which was embodied first and for all time in the Manger of Bethlehem and on the Cross of Calvary?"

## THE COLLEGE OF NURSING, LTD.

### RECEPTION AT THE AUTOMOBILE CLUB.

To celebrate the passing of the Nurses Registration Act, Sir Arthur Stanley (Chairman of the College of Nursing, Ltd., and Treasurer of St. Thomas' Hospital), held a reception at the Royal Automobile Club, on January 15th, supported by many members of the Council of the College Company. It was distinctly a social function, at which a large number of fashionably dressed women, V.A.D.s, and others were present.

A vote of thanks to Viscount Sandhurst (in charge of the Nurses' Registration Bill in the House of Lords), and to Dr. Addison (Minister of Health), was moved by Miss Cox Davies, who expressed the feelings of relief of those whom she represented that the long controversy over the registration of nurses was at an end, and the whole future of the organisation of the nursing profession safeguarded, not only for the essential well-being of the profession itself, but, what was still more important, for the safety and protection of the suffering humanity whom they served. She assured the Minister of Health of the most loyal support of the members of the College in the very difficult work of setting up the new Council.

Miss Sparshott, Matron of the Royal Infirmary, Manchester, seconded, as a provincial Matron, and as a convert to State Registration.

Dr. Addison, in the course of his reply, said that it was the intention of the present Ministry of Health to lose no time in extending and improving facilities for the work of nurses, not only to assist those in necessity through illness, but to guide and instruct the people in how to keep well. It was the preventive services that they must develop, and though this would cost a considerable amount, it was one of the great national economies that they should devote money in improving the fundamental services which went to prevent sickness and disability.

The Minister emphasised the opinion that nurses should be properly paid.

In regard to the first register, it was bound to contain the names of a large number of nurses who had practised their profession for a long time, but might not have had the opportunities required in the latest curriculum for training.

In conclusion, Dr. Addison urged upon the

nurses present that they should be good citizens first and nurses second. Speaking as a professional man, he declared that it was the bane of professions that their members were professionals first and citizens second. That was most unfortunate for the professions and the public, and he hoped that the nursing profession, through the new Council, would consider the needs of the profession and how they could best be moulded to the public weal.

Viscount Sandhurst said he had had a great deal of experience with nurses, but the crowning event was that he had assisted to pass this Act. He urged that nurses should not only be properly paid and fed, but properly housed. He was more than repaid for his easy task in piloting the Bill through the House of Lords if he had in any way contributed to the greater efficiency and greater happiness of the vast body of nurses to whom every one owed so much.

Sir Arthur Stanley, referring to an appeal to be made on behalf of the Nation's Fund for Nurses to endow the College of Nursing, and finance the Tribute Fund for Distressed Nurses, said they wanted to give every soldier and every relative of a soldier who knew what the nurses had done in the war a chance to show their gratitude. He announced that Viscount Burnham would open the columns of the *Daily Telegraph* about the 26th of the month to start a big appeal.

## APPOINTMENTS.

### LADY SUPERINTENDENT.

**Scottish Prison Service.**—Miss Minnie Miller has been appointed Lady Superintendent. She at present holds the position of Matron at the James Murray Royal Asylum, Perth.

### SCHOOL NURSE.

**County Borough of West Ham.**—The following School Nurses have been appointed:—

Miss Lilian V. Young. She was trained at the Hampstead General Hospital, Haverstock Hill, and has worked at the North Eastern Fever Hospital.

Miss Emma J. Marsh, trained at the St. Marylebone Infirmary, and has had military nursing, Q.A.I.M.N.S.R. and private nursing experience.

Miss Francis G. Hobbs, trained at St. Giles' Infirmary, Camberwell, and has been ward sister and night superintendent at Hackney Infirmary, and Sister Q.A.I.M.N.S.R.

Miss Bertha Downs, trained at the North Ormesby Hospital, Middlesbrough, has been on the staff of the 3rd London General Hospital (T.F.N.S.), and a temporary School Nurse, London County Council.

### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

#### TRANSFERS AND APPOINTMENTS.

Miss Janet A. Macleod is appointed to Shropshire N.F. as Assistant Superintendent. Miss Mabel A. Battye to Adlington. Miss Florence E. Bellman to Highcliffe. Miss Annie Goodison to Heath and Williamthorpe. Miss Beatrice J. Naidon to Willenhall. Miss Annie Mannion to Market Rasen. Miss Mary Powell to Gillingham. Miss Edith Richardson to Fulham. Miss Esther Snowden to Carlisle. Miss Florence N. Underhill to Guildford.

## THE NURSES CO-OPERATION.

The dispute between the Members of the Nurses' Co-operation, 22, Langham Street, W. (who are the incorporated lay managers and others) and their Nursing Staff, who are *not* members of the Co-operation, appears to be, from statements issued by both sides a perfectly clear issue. The dissentient members of the Nursing Staff desire to become Members of the Co-operation and to manage their own affairs; and the incorporated Managers point out that under the present Articles of Association this is impossible, and they state, which is not a fact, that these Articles cannot be altered without an Act of Parliament! They also point out that if the Co-operation is wound up, the surplus funds and assets may not be distributed amongst the nurses, but may be "handed over to some other institution having similar objects" to be selected by them, the Members, or by a Judge of the High Court.

This is quite true; and one wonders why trained nurses ever agreed to such a travesty of "co-operation"—presumably they never read the Articles of Association before signing their agreement with the "Members!"

But having built up a fine business by their good work, "the members of the Nursing Staff" naturally wish to keep it; and seven of these sitting on the Committee, have issued a reasoned reply to the ingenious, and in our opinion, misleading statement issued by the Members of the Co-operation, with which the public cannot fail to sympathise.

These "Members" have also sent out a card asking the Nurses to reply "Yes" or "No" to the question whether they wish the Co-operation to continue, and the Secretary appears, from the following letter, to have been very busy whipping up replies.

DEAR SISTER,—I am writing to tell you that I have not received the card with your reply to the question put by the Honorary Members of the Co-operation, and to remind you that the 14th of January is the last date given for its return.

The answer "Yes" means that you wish the Co-operation to continue.

The answer "No" means that you do not wish it to continue.

The fact of no answer being received by the 14th of January will, I take it, be dealt with as an answer "No."—Yours sincerely,

L. A. CROWE, Secretary.

What right has the Secretary to make any such deduction? None whatever. Such a suggestion is, in our opinion, simply made to influence unduly a Nurse's right not to take any part in the controversy, if she so chooses, and influence her to reply "Yes."

The 14th January is stated to be the last day for sending in the cards, and yet we find the Secretary in a letter dated the 15th, still urging a Sister to sign if she wishes her answer "to be in time for the scrutineers!"

We know how exceedingly difficult it is for working nurses to get a word in the London daily press, when in opposition to powerful, rich and influential persons such as govern hospitals and nursing institutions, and who hold the purse strings; but we hope the nurses on the staff of the Co-operation will appeal to the public for sympathy by every means in their power, if Sir Henry Burdett and other "Members" of the Co-operation attempt to wind up their business, and hand over their assets such as the Howard de Walden Club to "some institution having similar objects." There are always such predatory institutions on the prowl, anxious and willing to pick up such unconsidered trifles, and at the present moment the danger is imminent.

## QUEEN MARY'S HOSTELS FOR NURSES.

The following paragraph has been officially communicated to this Journal for publication:—

"The new and permanent Hostel which was opened on October 1st, 1919, at 194, Queen's Gate, is for Army Nurses and a few Queen's Nurses staying for a short time on leave. The Superintendent is Mrs. Dundas, and the Secretary, Miss Fitz-Patrick.

"The 'One Night' Hostel, at 50, Warwick Square, is for Army Nurses passing through London and requiring one night's accommodation. Hon. Superintendent, Lady Gladstone; Resident Superintendent, Miss Sikes; Assist.-Superintendent, Miss Hughes. This Hostel will be closed on March 12th, owing to the house having been sold by the owner.

"All communications should be addressed to the respective Superintendents.

"The hospitality of Queen Mary's Hostels for Nurses is entirely free, and guests are asked to kindly note that the Committee in tendering this hospitality do so on the understanding that no collections are made by the guests while under their roof for presents to members of the Staff, either past or present, who are or have been hostesses on behalf of the Committee. The Staff themselves deprecate such collections, and will immediately report to the Committee any attempt, however kindly meant, to infringe this rule, the disregard of which in the opinion of the Committee is subversive of the ideal relations between host and guest."

## COMING EVENT.

January 29th.—The Matrons' Council. Winter Meeting, 2, Portland Place, W. By kind invitation of Mrs. Walter Spencer. 3 p.m. Tea 4.30 p.m.

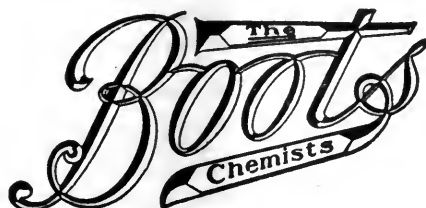
## ACROSTIC, B.J.N.

Brave and unflinching,	Boundless, aspiring,
Just and convincing,	Judicial, enquiring,
Never dismayed.	Nurses' first aid.

Boldly advancing,	Best thanks bestowing,
Jealously guarding,	Join all in showing
New efforts made.	Noble work done.

Maud M. Tipper.

# A Reliable Dispensing Service.



**W**E are greatly gratified by the constant appreciation of our Dispensing Service shown by the Medical Profession; and we are satisfied that the more widely its merits are known the more widely it will be used.

The keynote of this service is reliability.

**First:** The Dispensing Department at each branch is under the charge of a fully qualified and experienced Chemist.

**Second:** The Dispensing Equipment at every branch is perfect — no makeshift apparatus or arrangements are permitted.

**Third:** All the Drugs and Pharmaceutical Products used are guaranteed. Our unique laboratory facilities at Headquarters enable us to maintain a very strict analytical control. Nothing is taken into stock unless it satisfies the most rigorous tests.

**Fourth:** The Drugs at every branch are always fresh. The extent of our business and our system of regular weekly supply ensures that nothing gets stale on our shelves. Medical men will recognise that the quality of freshness is secondary only to that of purity.

We have confidence in inviting you to send your Prescriptions to

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## OUR FOREIGN LETTER.

## A VISIT TO CRACOW (OLD CAPITAL OF KINGDOM OF POLAND AND CAPITAL OF AUSTRIAN POLAND).

BY MISS JENTIE PATERSON.

*(Concluded from page 44.)*

Our return journey was interesting and bordered on the melodramatic. We were travelling by an "Express," and at the end had left ourselves rather short of time, so short that after discussion with the booking clerk on the advisability of travelling 1st or 2nd class—as the former necessitated a change at the border of old Russian Poland—I hastily glanced at the tickets, and seeing a "2" thought they were all right, and ran for the train, little thinking there was another town on the same line with a similar name to Zawiercie! The train was packed; it had come from Lemberg. A regiment of infantry flung itself in the only 2nd class coach I could see. We had to get in, as we were on duty at 6.30 next morning, so I caught hold of an officer and impressed him with our importance. The soldiers fell back, we gained the already overcrowded corridor of the coach, and gradually edged forward till I spied an almost empty compartment, in which an irate Courier was remonstrating with passengers who had gained access through the window. During the discussion, oblivious of the notice in French reserving the compartment for the Courier, we two sisters planted ourselves in the nearest corner! This added fresh fuel to the Courier's ire, and the other men sided with him—certainly if they could not remain we should not. So they vollied at us in all languages, and proved to me the folly of our old proverb "that woman has the gift of the 'gab.'" I expostulated in German "that women could not stand in a crowded corridor while one man, even if he were an Emperor, occupied a whole carriage." For obvious reasons I was temporally bereft of all comprehension of the French language—the fun was fast and furious, and at one time I thought I would be lifted bodily and flung on the heads of the passengers in the corridor—who watched the conflict with interest. The courier's hair was on end, he danced about like a marionette, one minute throwing himself half out of the window, while he called wildly for station master or guard, the next returning to his wordy assault. My companion's part was blank astonishment, coupled with ignorance of *all* languages except English; we sat tight, dreading every minute that our Kahki-clad medical officer would interfere and draw the storm on himself; in which case I foresaw we might require to retreat to save the uniform from insult, because technically we were in the wrong. At last seeing our determination, a soldier edged his tired wife on to the seat opposite us, then a sister of mercy got in, and so the carriage filled up while the courier, red-eyed and breathless,

subsided into the far corner and finished his journey at the next station. We next turned our attention to the tickets, and decided I had paid all the way, but received tickets for a village two short of our destination. We hoped the tickets might be examined before we got there and save explanation on the train, as we felt we could make it all right at Zawiercie where we were known to the station officials. But our luck was out! Just as we drew out of that station, the ticket collector appeared; we explained, and he muttered about reporting it when we arrived, so we felt all was well; but *arrived* at Zawiercie things assumed a different character! The train collector notified we had travelled beyond station marked on our tickets, and the station master was on the alert—as we discovered afterwards he would require to have refunded the money.—A fellow traveller came to our aid, and I stated my case through him in German to the Polish officials; as it was 2 a.m., I said we would return in the morning if any further trouble, and we went off apparently leaving them satisfied. Presently we heard panting behind us, and there was a porter tearing after us followed by the ticket clerk, a rotund gentleman in olive green, followed in turn by the station master, an attenuated human with red braided cap and military uniform. Tableau vivant! Stolid Great Britain again faced the volcanic temperament—the joke being we had not told the doctor about the mistake in the tickets, and he having secured a seat well forward in the train had his ticket checked in blissful ignorance before the fatal station! To cut a long story short and save a man's reason—the station master by this time made a good second to the courier—I suggested giving him 10 marks to pay the difference between the two stations and which we would recover when the mistake was cleared. No! he shrieked he wished the fare from Cracow over again! This being beyond reason we acceded to his request to return to the station and make our declaration before the police. While they wrote out the deposition I got our German-speaking friend to ask the booking clerk casually the fare from Cracow; to my surprise he named a sum much less than I had paid. After further examination of passport, I again showed them our special papers from the Public Health Ministry in Warsaw and immediately the police stopped writing, and the station master who had waved the papers aside before, begged us, cap in hand, to go and think no more of it; but it was late, we had been unnecessarily kept out of bed, so I said no! and much to their surprise and annoyance, counter-claimed for excess fare charged. At this moment we were startled by a loud chuckle, and looking round we saw an old engine driver in fits of laughter; "Go on Fräulein he cried, have your own back, they should never have put you to all this inconvenience! I kept up the farce and made them sign the counter-claim. Finally we got home and to bed, much amused at the ending to an enjoyable and remarkably cheap holiday!



## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## COMPARISONS ARE INSTRUCTIVE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I had the privilege of attending the meeting at Chandos Street and also the very elegant one at the Automobile Club on the 15th inst., both held to celebrate the passing into law of the Nurses' Registration Act.

"Comparisons," we are told, "are odious," but as they are also instructive, perhaps you will find a corner in your paper to record the impressions of a very ordinary person who is not deeply versed in these matters.

The first thing that struck one in both places was the audience. In Chandos Street it was alive, interested and full of vitality, and there could be no doubt but that it was almost entirely composed of nurses. In the fine ball-room of the Automobile Club, the audience was most chaste—fur coats, pearl necklaces, gold-handled umbrellas were the order of the day—but very little enthusiasm was displayed. A good many V.A.D.s, a sprinkling of ladies in khaki, and seemingly the cream of society, had turned out to hear the Minister of Health and the other gentlemen who accompanied him; except for the representatives of the Army and Navy, however, one looked in vain for nurses.

The second point that struck one was the difference in the Minister. In Chandos Street, he evidently found himself the friend of the family and an honoured guest, and seemed quite at home and interested. At the Automobile Club, he appeared to be infected by what I might call the ladylike—not to mention Early Victorian—air of the audience, which appeared too apathetic or uninterested to applaud, and seemed afraid to raise its voice. I might remark also that the ladies who spoke from the platform seemed afraid to raise *their* voices, as it was very difficult to hear what they had to say. If the Minister had had any doubts as to which audience was the living force and the one most likely to be of service to the State, I think probably he knows now.

Yours faithfully,

A COLLEGE MEMBER.

## NURSES SHOULD BE ADMITTED AT LESS COST.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—May I write a protest against the exorbitant prices being charged for seats for the film play, "The End of the Road," at the evening performances?

As a Public Health Nurse, surely one should see this film at a figure within one's income? Three-

and-six is surely beyond the majority of us for such a valuable item in our professional education.

Faithfully yours,

EDITH HASLAM,

Infant Welfare Centre, Superintendent.  
20, Archer Street.  
Notting Hill, W. 11.

## KERNELS FROM CORRESPONDENCE.

R.B.N.A.—"I have been a member of the R.B.N.A. for many years. I am glad to see this Chartered Corporation taking such an active and leading part in nursing affairs. This is as it should be, because we shall all register now that registration is to be under State authority; but we shall then, as professional nurses, need our Association for social purposes more than ever. Can you get it realised by the younger nurses that nothing worth having is to be had without some personal sacrifice—and financial support. If every Registered Nurse would join the Association and subscribe one guinea annually for the upkeep of high professional ideals and, incidentally, personal benefit, as the members of the British Medical Association do—and to include the B.J.N.—we should prove our solidarity and grow in grace and influence. I gather from the report of the College meeting, at the Automobile Club, that its Chairman proposes to launch another cadging campaign on our behalf through the *Daily Telegraph*—this time from the 'Tommies!' It is scandalous, if true; and now that we have the status of professional women, it is our duty to come out and give expression to our detestation of this proposed humiliation. What has the Army to do with Nursing Education? To serve it in the war was our greatest honour and pleasure, and no one has any right to demand payment in our name. We must demand an interview with Lord Burnham, the proprietor of the *Daily Telegraph*, and let him plainly understand the feelings of the self-respecting members of the Nursing Profession (for we are a profession now) to any such appeal. His chief lady journalist—Miss Billington—well knows our feelings on this matter, as does Lady Cowdray." [We strongly deprecate an appeal to the soldiers and their families, in support either of Nursing, Education or Charity for Professional Nurses, and agree with our correspondent that neither Sir Arthur Stanley nor Lord Burnham has the right to make such an appeal in our name.—ED.]

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

January 24th.—What do you know of anthrax, and of the methods of infection with this disease? What are the nursing points to be observed in caring for a case?

January 31st.—Describe the Psychic Temperament and its place in Progressive Evolution.

## The Midwife.

### "HELPED TO THRIVE AND STRENGTHENED TO LIVE."

No greater plea could be put forward for financial support for the St. Marylebone Babies' Nursing Home, 90, Marlborough Place, St. John's Wood, than the details published in the programme of a concert recently held on its behalf at the Hampstead Conservatoire, when Lady Wyndham (Miss Mary Moore) charmed her audience with her short stories, and Miss Gertrude Peppercorn gave great pleasure with her pianoforte solos.

Here is the record of the Home in brief:—"Hardly a baby admitted to the Home but would have died if left at home. . . . Hardly a baby admitted to the Home, but after a few weeks is helped to thrive, and strengthened to live." Those who want to help the good work can do so by sending their subscriptions and donations to the Hon. Secretary, Lady New, 55, Avenue Road, N.W.8, or the Treasurer, W. Darwon, Esq., 82, Clarence Gate Gardens, N.W.1, or the Matron at the Home, by whom they will be gratefully received.

### ANTE-NATAL CLINIC.

The Great Northern Central Hospital has inaugurated an Ante-Natal Clinic which will be held weekly at the Out-Patients Department, on Thursdays. An additional Session of the Gynæcological Department will also be held on Thursday mornings, as well as on Monday afternoons, as hitherto.

These Ante-Natal Clinics are of great value, and should save a large amount of preventible suffering, and also help to raise the general standard of national health by giving wise advice to expectant mothers, who are, as a rule, only too anxious to follow it, if they have confidence in their advisers. The patient endurance by many women, in the past, of suffering, and lowered vitality, which they should never have had to endure is one of the tragedies of the want of knowledge, which every woman should have the opportunity of acquiring.

### WEANING.

The *Pennsylvania Medical Journal* recommends beginning weaning with a cow's mixture considerably weaker than would be given to a healthy baby of the same age. Half the strength would be a wise formula; if this is well borne, it can be gradually increased. Avoid weaning during hot weather. If possible, wean slowly, beginning with one bottle feeding a day. In four days a second bottle can be given, the breast feeding being gradually discontinued. In any case, if the mother's milk is insufficient, cow's milk should be given in addition. At nine months a baby may be given a bottle feeding

once a day to train it to digest cow's milk, even if it is thriving on breast milk.

### ABOUT WATER.

Mr. Eustace Miles in his book, "Self-Health as a Habit," published by J. M. Dent & Sons, Ltd.,\* has much to say about the use of water, which expectant mothers would do well to note, for, as we all know, a danger during the period of profound changes which precedes the birth of a child is that the toxins in the blood shall not be freely eliminated. Speaking generally, Mr. Eustace Miles says:—

"Water not only quenches thirst, it also gives a sense of bulk, and satisfies hunger to some extent. For many people it would be far better to fill up with water than with the vast quantities of unnecessary foods that they take, particularly foods of the starchy and sugary type, foods that tend eventually to a very serious form of acidosis."

Water helps the peristaltic action of the digestive and eliminative organs. It also, as Pawlov has proved, arouses not only the saliva, but also the gastric juice.

It conveys oxygen into the system.

It serves to convey food not only into the system, but also through the system.

It is water that helps to distribute the food, as the canal system used to and should still help to distribute food and other commodities through our country.

Above all, water eliminates toxins and waste matter and thus purifies the system. The waste matter goes out through the breath, the skin, the kidneys, and the bowels. Without water the vast amounts of poisonous stuff would be retained within the body. The Japanese use hot water freely, not only externally, but also internally.

It is very astonishing that when the water intake is doubled, the urine still carries out not much less waste matter in proportion. The specific gravity is not so very much lower. The lesson is obvious. The water must be carrying out a great deal of poison.

### ALLENBURYS DIETETIC PRODUCTS.

The Dietetic Products of Messrs Allen & Hanburys, Ltd., 37, Lombard Street, E.C.3, have gained a deservedly high reputation, at home and abroad; and the FOODS FOR INFANTS have the confidence of maternity nurses, and midwives far and wide. These foods are not only of the highest quality, but are supplied in three different grades adjusted in their composition to the advancing stages of infancy. Like the Diet for Invalids they have the further advantage of being not only absolutely reliable, but easily prepared.

\* 10, Bedford Street, London, W.C. 2.

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
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## EDITORIAL.

### ROTTEN FINANCE.

The appeal launched on Monday last for the *Daily Telegraph* Shilling Fund for Nurses by the proprietor, Lord Burnham—in reality an appeal to bolster up the insecure financial basis upon which the College of Nursing Company is founded, and incidentally to provide charity doles for nurses who have a right to a provision from the State—outrages the feelings of every self-respecting nurse.

We imagine it is unprecedented that a limited liability Company, fearing that its income will be insufficient to pay its way, should appeal to the charitably inclined to supply the deficit. In the course of its inglorious career the question of financial stability does not appear to have engaged the attention of the College Council, or of its 16,000 members. If they cannot set their own house in order, there appears no reason why men of business acumen, or of goodwill, should do so for them.

Moreover, we consider that the Matrons on the College Council, and the heads of the Military Nursing Services, specifically mentioned in the *Daily Telegraph* appeal, have most cruelly betrayed the trust reposed in them by permitting and supporting this appeal, which cuts at the economic independence of a self-respecting profession, and which is launched in a manner which its members both detest and resent.

The Matrons should have been the first to protect the economic status of the nurses, instead of permitting attempts to depreciate it.

This disingenuous Appeal for the College Company—made to every soldier, every sailor, everyone who served his country in an auxiliary force, as in the women's uniformed services—is based on the work of nurses for wounded sailors and soldiers. Nurses considered it an

honour and a privilege to serve the men who risked, and in many instances gave, their lives for the cause of humanity, and they consider it shameful that the sense of obligation which their former patients may feel for them should be exploited to extract from these men shillings which they can ill afford, on the plea that nurses are in necessitous circumstances; and incidentally as a huge advertisement for the *Daily Telegraph*.

What would be the feelings of disabled officers if an appeal to the rank and file of the Navy and the Army were made on their behalf? The sense of indignation on the part of the nurses is exactly the same, and we cannot believe that these ladies will permit this outrage on their professional prestige without a protest to the Army Council, to which they have now the right of appeal.

It appears the irony of fate that Lord Burnham, for many years one of the most persistent blockers of Nurses' Registration in the House of Commons, should now advance the Pecksniffian plea of the privileges conferred upon the Nursing Profession by the Nursing Acts, as a reason why the public should help to organise nurses through shilling doles.

One significant fact is brought out in the article promoting the "*Daily Telegraph* Shilling Fund for our Nurses": the *Daily Telegraph* states that the College of Nursing, Ltd., has so far met its expenses "from the fees of the nurses for registration, and with the help . . . of ladies who secured the Star and Garter, Richmond." College members, who have been assured that the guineas paid by them to the College of Nursing, Ltd., will insure their being placed on the State Register "automatically, without further fee," and that they have been invested for this purpose, await a statement from the Council of the College on their position.

## OUR PRIZE COMPETITION.

WHAT DO YOU KNOW OF ANTHRAX, AND OF THE METHODS OF INFECTION WITH THIS DISEASE? WHAT ARE THE NURSING POINTS TO BE OBSERVED IN CARING FOR SUCH A CASE?

We have pleasure in awarding the prize this week to Miss Jean M. Scott, Royal Waterloo Hospital, Waterloo Road, S.W. 1.

### PRIZE PAPER.

Anthrax, malignant pustule, wool-sorters' disease, or splenic fever, is a very serious disease, occurring chiefly in South American and Australian sheep and cattle, and in those who tend them, or have the handling of their skins or fleeces, even long after removal of the latter from the animals. Occasionally epidemics have broken out, one occurring in 1880 at Bradford, which led to official enquiry and subsequent investigations into the pathology of the disease. Lately infection has been brought from Japan with the import of shaving brushes from that country.

The bacillus *Anthraxis* is the cause of the disease, a comparatively large, non-motile bacillus which grows in chains, multiplies by fission, and, when in contact with oxygen, by spores. These spores possess great vitality, retain life for years in dried skins or fleeces, and are not destroyed by boiling, freezing, or by a 5 per cent. carbolic solution, nor by the gastric juice like many bacilli.

The disease in man is divisible into two primary forms—external and internal.

The external form is caused by direct inoculation of the skin, or of a superficial mucous membrane; and the internal by entrance of the virus into the respiratory or alimentary passages. The disease is rarely, if ever, transmitted from one patient to another; but the discharge from the malignant pustule is dangerous.

*External form.*—After inoculation takes place a few hours or days elapse, a red itching pimple appears, which is converted into a vesicle, the surrounding tissues become red and brawny, gangrene occurs at the focus of inflammation, and around this a ring of secondary vesicles form, there is much œdema; the neighbouring lymphatics become enlarged, feverish symptoms set in, the patient may die of sudden syncope, exhaustion, coma, or, if the neck is affected, œdema of the glottis.

*Internal.*—Caused by inhalation or swallowing of dust laden with spores; when they have been inhaled this takes the form of pneumonia with hæmorrhages, the pleural sacs fill with serum and the lungs collapse; when swallowed,

ulceration of the stomach and intestines, with gangrene of the spleen.

The brain and its membranes may be involved, but death usually occurs before this stage.

*Treatment.*—Prophylactic treatment is most important. Thorough disinfection by superheated steam of all contaminated fleeces and those coming from places where anthrax is known to exist. All fleeces should be handled wet, and the workers' hands washed and clothes changed before eating.

For the external form, opening of the pustule, or complete excision of it, cauterising the wound, and injecting strong antiseptics into the surrounding tissues. Encourage oozing from the wound, the object being to prevent the entrance of the bacilli into the veins. As a dressing, biniodide and glycerine compresses aid to draw out the lymph. A serum found by Selavo, taken from asses' blood, has been known to cure, even after the bacilli had entered the blood stream; by its use excision may be avoided.

Support the strength, especially by concentrated animal diet; quinine is sometimes given, and strophanthus or other heart tonics.

The internal form is by far the most dangerous, death usually occurring in from two to six days after the onset. Of the treatment when fully developed symptoms are present little can be said. The complications must be dealt with as they arise, and the symptoms relieved as much as possible. The strength must be kept up by means of stimulants, heart tonics, and by the administration of meat broths and other fluid nourishments. Serum treatment will probably be employed; the pleural fluid is usually evacuated. When the cerebral and spinal centres are involved there may be delirium, convulsions and tetanic spasms; and in the gastro-intestinal form hæmorrhage from the bowel. Death may be preceded by coma, or the patient may be conscious to the last.

When recovery occurs, convalescence is usually very prolonged.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Wilkinson, Miss M. James, Miss P. Thomson, Miss D. Jennings.

Miss Wilkinson writes that after inoculation a red inflamed pustule appears; this increases in size, and eventually a bleb filled with pus appears on the summit.

### QUESTION FOR NEXT WEEK.

Describe the Psychic Temperament and its place in Progressive Evolution.

## NURSING ECHOES.

Lord Burnham, the proprietor of the *Daily Telegraph*, refused on Monday to see a deputation of representative nurses, members of the organized Nurses' Societies, who claimed the right to place their views before him concerning the degrading "Shilling Fund for Nurses," which he has launched upon the public without consulting the nurses themselves. Presumably Lord Burnham imagines that the cadging policy of the College of Nursing Company can be thrust upon the Nursing Profession at large, without protest. He will find that he is mistaken.

During a recent visit to Birmingham, Sir Arthur Stanley, speaking as the guest of the Rotary Club on the reasons why voluntary effort should continue in peace time, said, among other things:—"There was the question of nurses. At present many villages enjoyed the services of fully-trained nurses whose time was mainly employed in doing small jobs, such as binding up cuts, &c., which anybody could do. He suggested that the great and well-organised system of the V.A.D.'s should be used to carry out this service. The ordinary V.A.D. nurse could do nine-tenths of the work at present done by fully-trained nurses in the villages. In the market towns or larger villages these latter women should be installed to co-operate with and direct the work of the V.A.D.'s in the surrounding districts."

We wonder how this programme appeals to the thoroughly trained district nurses who are members of the College of Nursing, Ltd., of which Sir Arthur Stanley is chairman. Also, the villagers who enjoy trained nursing skill when sick may also have a word to say on the question.

This suggestion of depriving the Profession of Nursing of one of its most interesting branches of work, also touches intimately nursing economics, and it is just here that a Nurses' Trade Union needs to step in and ask the reason why? The question would be especially pertinent, as V.A.D.'s proved a very costly luxury during the war, especially on foreign service, where the cream of the work (as in Italy) was allotted to these untrained women. If rural district nursing is to be handed over to occupy the spare time of young women of social position, God help the poor!

The Matron of St. Mary's Hospital for Women and Children, Plaistow, is most anxious

to get in touch with *all* past nurses, so that they may learn that a grand bazaar is being organised by Lady Helen Seymour at Claridge's Hotel on Thursday, April 15th, for the special fund for building the new home for the nurses. The Matron hopes that every nurse will endeavour to send something for the hospital stall, so that it may be very heavily laden with articles for sale. No matter what is sent, plain or fancy articles, paintings, dolls, toys, in fact, any and everything, will be most acceptable—doubly so if all are plainly marked with the prices at which they are to be sold and sent direct to the Hospital. £18,000 is very urgently needed to complete the fund.

The Matron and Nurses of the Western Infirmary, Glasgow, held a very successful sale of work recently in aid of the Nurses' Memorial to King Edward VII, Chamberlain Road, Edinburgh, the proceeds of which amounted to fully £420. A similar effort was made by the Matron and Nurses of the Glasgow Royal Infirmary, the receipts in this instance, amounting to £40, being allocated for the purpose of providing coal for the home.

Lady Arnott, D.B.E., presided, on January 28th, at the formal opening of the newly established Nurses' Club, 54, Fitzwilliam Square, Dublin.

Speaking in support of the Indian Nurses' Hostel Fund, by permission of Lady Minto at 95, Lancaster Gate, Lady Carmichael said that when she first went to Bengal in 1912 she visited all the hospitals of the Presidency, and found that there were no nurses except in Calcutta. Even at Dacca, where there was a medical school, both men and women passed out from their medical training without knowing what nursing meant. Matrons were put into four hospitals, but it was impossible to fill them with English nurses owing to the cost of bringing them out. They started a scheme by which Indian nurses were trained in certain hospitals in Calcutta under English nurses. The difficulty was that the Indian girls themselves did not care for nursing as a profession. There were strong social prejudices against it. Beginning with country-born Anglo-Indian girls, a certain amount of training was given, but they had still to raise the profession so that high-caste girls or widows would take it up. After a good deal of trouble, five high-caste young women entered Dufferin Hospital for training. It was hoped to start a hostel for

Indian nurses, for which funds were urgently required.

The Ecole Belge d'Infirmières Diplômées at Brussels, now known as the Ecole Edith Cavell—its first superintendent—is to be extended. Last Saturday Miss Heynemann, an American lady, inaugurated a ward named California House, containing twelve beds, soon to be extended to twenty-five. A representative company was present on this occasion, including the British and American Ambassadors and their wives, and the celebrated Dr. Depage, to whom the school chiefly owes its origin.

In the trial of Quien—according to the Paris correspondent of the *Times*—the prosecutor now declares that it has been definitely established it was not Quien who denounced Edith Cavell.

Influenza has reappeared in the United States, 5,000 cases are reported in Chicago, but of a milder form than last year. The Health Commissioner states that everything is ready to deal with a serious epidemic. Nursing aid, both in the U.S.A. and at home—should we suffer again from this scourge—will be more easily secured now that our nurses on war service are released and rested.

Miss Alice Fitzgerald, as Director of Overseas Nursing in Europe, American Red Cross, has recently made a tour of the Balkan States, and speaks with great enthusiasm of Miss Helen Scott Hay's work in the Balkans. Under her inspiration the Greek Government is contemplating the development of an extensive child-hygiene organisation, and a training school for Greek women is also being discussed in Athens.

We have learned to take "tall" stories from the States with reservations, and that told in the *Weekly Dispatch* may or may not be true. Anyway, it reports that "Nothing is sacred to the profiteer, and the facts in connection with the profiteering in blood have been disclosed in strikes by men who give their blood to the Flower Hospital, New York. They are strong, healthy men with plenty of blood, who have been selling their surplus to the hospital when operations of blood transfusion had to be performed. Formerly the rate for a pint of blood, which is normally the amount necessary to save a life, was £5. Now they demand '£11 or no blood.'" The Nursing Staff have come to the rescue, and Nurse Jedlica and seven of her colleagues have offered their "blood for nothing," so this amazing demand of profiteering ghouls has been defeated.

## HONOURS FOR NURSES.

### WAR SERVICES BY LAND AND SEA. ADDITIONS TO LISTS OF MENTIONS.

The names of the following ladies are to be added to those brought to notice for distinguished and gallant services and devotion to duty:—

#### MESOPOTAMIA.

By Lieut.-General W. R. Marshall, K.C.B., K.C.S., Commanding-in-Chief Mesopotamia Expeditionary Force:—

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Cooke, Sister Miss E.

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE RESERVE.

Brown, S./Nurse Miss I.; Bushell, Sister Miss E.; Davies, S./Nurse Miss E. M.; Dickie, S./Nurse Miss J.; Garvey, S./Nurse Miss J. M.; Gorick, S./Nurse Miss L. J.; Lennox, Sister Miss H. M.; Leonard, S./Nurse Miss H. M.; MacLavery, S./Nurse Miss M.; Smith, S./Nurse Miss A. B., Wheatley, Sister Miss K. H.

#### TERRITORIAL FORCE NURSING SERVICE.

Parker, S. Nurse Miss C. M.; Taylor, S./Nurse Miss E.

#### TEMPORARY NURSING SERVICE, INDIA.

Ennis, T./Nurse Miss E. E.; Hearn, T./Nurse Miss M.; Miller-Horan, T./Nurse Miss C. C.

#### VOLUNTARY AID DETACHMENT.

Mungavin, Nurse Miss M. E.; Mungavin, Nurse Miss M. R.; Park, Nurse Miss C.

#### MISCELLANEOUS.

Angelique Fleuraux (Ma Mère Madeleine) Sister, Civil Hospital, Baghdad.

#### SALONIKA.

By Lieut.-General Sir G. F. Milne, K.C.B., K.C.M.G., D.S.O., Commander-in-Chief, British Salonika Force:—

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Medforth, Sister (A./Matron) Miss M. E., R.R.C.

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE RESERVE.

Campbell, S./Nurse Miss H.; Green, Sister Miss L. M.; Keates, S./Nurse Miss E. M.; Kellett, Sister Miss E. S.; Reilly, Asst.-Matron Miss M. C., R.R.C.; Renwick, S./Nurse, Miss E. R.; Rockett, Sister Miss D. E.; Turner, Matron Miss I. M., R.R.C.; Withers, Matron Miss A. H., A.R.R.C.; Wormald, S./Nurse Miss E.

#### TERRITORIAL FORCE NURSING SERVICE.

Durose, Sister Miss M.

#### VOLUNTARY AID DETACHMENT.

Beard, Nurse Miss A. L.; Fraser, Nurse Miss J.; Wood, Nurse Miss M. C.



## ROYAL RED CROSS AWARDS.

The King has awarded the Royal Red Cross to the following ladies in recognition of valuable nursing services under the British Red Cross Society or Order of St. John of Jerusalem in England rendered in connection with the war. Dated June 3rd, 1919 :—

### ROYAL RED CROSS, FIRST CLASS.

Miss E. Davies, A.R.R.C., Matron and Lady Supt., R. National Hosp., Ventnor; Mrs. K. L. Guise-Moore, A.R.R.C., Matron (Actg.-Commdt.), Farnborough Court Aux. Hosp.; Miss L. Hicks, Sister, Highbury Aux. Hosp., Moseley; Miss F. E. Hunt, A.R.R.C., Matron, Ralston Aux. Hosp. for Paraplegics, near Paisley, Renfrewshire; Miss M. E. Johnston, A.R.R.C., Matron, Ulster Volunteer Force Hosp. and Aux. Mil. Hosp., Belfast; Miss M. Kempson, Matron, Royal Sea Bathing Hosp., Margate; Miss I. C. Mackintosh, A.R.R.C., Matron, Empire Aux. Hosp., Vincent Square, London; Miss M. B. Monk, A.R.R.C., Matron, London Hosp.; Mrs. M. A. Prys-Owen, A.R.R.C., Matron and Comdt., Aberartro Aux. Hosp., Llanbedr; Mrs. F. H. Stephens, A.R.R.C., Matron, Aux. Hosp. for Officers, Chichester Terrace, Brighton; Miss G. A. B. Stevens, A.R.R.C., Matron, Overton Aux. Hosp., Frodsham; Mrs. K. H. E. Talbot, A.R.F.C., Nurse and Comdt., V.A. Hosp., Middleton St. George, Co. Durham.

### ROYAL RED CROSS, SECOND CLASS.

Miss M. E. Ainley, V.A.D., The Plains and Brooksbank Aux. Hosp., Elland, Yorks; Miss G. L. Aldous, Sister-in-Charge, Sutherland Hosp., Reading; Miss C. Ambrose, Matron, Longford Hall, Stretford, Manchester; Miss E. Armitage, Matron, County Hosp., Huntingdon; Miss E. Armitage, V.A.D. Nurse, Red Cross Aux. Hosp., Beeston; Miss F. Ash, Matron, Kensington and Fulham Gen. Hosp.; Miss R. E. Bazley, V.A.D. Nurse, E. Lancs Pensions Hosp., near Crumpsall, Manchester; Miss E. R. Beamish, Matron, Cavendish Bridge Aux. Hosp., Shardlow; Mrs. M. T. Bere, Matron, Ashcombe House, Weston-super-Mare; Miss J. Blower, Matron, The Deanery Aux. Hosp., Manchester; Mrs. I. M. Booth, Asst. Commdt., 16th North'd V.A. Hosp., Ashington; Miss A. M. Boutwood, Sister, Old Hastings House Aux. Hosp.; Miss D. Boyd, V.A.D. Nurse, Allerton Aux. Hosp., Sutton Coldfield; Miss M. A. Brindley, Sister, St. John's Hosp. for Pensioners, Shrewsbury; Mrs. M. F. Burridge, Sister, Slough V.A.D. Hosp., Langley, Bucks; Miss E. Buszard, V.A.D. Nurse, Aux. Mil. Wards, Gen. Hosp., Northampton; Miss F. E. Butt, V.A.D. Nurse, Exmouth Aux. Hosp., Exmouth; Miss M. Campbell, V.A.D. Nurse, Caenshill, Weybridge; Miss I. Carson, Matron, St. Katherine's Lodge Aux. Hosp., Regent's Park; Miss R. E. Case, V.A.D. Asst. Nurse, Urmston and Fairfield Court Aux. Hosp., Eastbourne; Mrs. A. Chamberlain, Sister, Gen. Hosp., Nottingham; Miss W. Clark, V.A.D., Arnold Aux. Hosp., Doncaster, Yorks; Mrs. E. C. Clay, Commdt. and V.A.D. Nurse, The Holborn Aux. Hosp., Holyhead; Miss I. Clegg, Sister, St. John Ambulance Drill Hall Aux. Hosp., Rochdale; Miss E. Coates, V.A.D., Nunthorpe Hall Aux. Hosp., York; Miss P. Coldwell, Sister, Honley Aux. Hosp., Yorkshire; Mrs. A. Corser, Sister, Aux. Mil. Hosp., Isleworth; Miss F. Crawshaw, Sister, Foye House Red Cross Hosp., Leigh Woods-Clifton; Miss E. Cross, V.A.D. Nurse, Brook House Aux. Hosp., Levenshulme, Manchester.

(To be continued.)

## THE NURSES' THANKSGIVING SERVICE.

It is not a usual practice to hold Thanksgiving Services for the passing of Acts of Parliament, and yet, what is more natural or more fitting than that those who have prayed and striven for many years for the enactment of legislation which they believe is for the benefit of the community should unite in public thanksgiving—when at length their task is accomplished?

Amongst nurses, at any rate, there was an imperative desire that the joy and thanksgiving in their hearts for the passing of the Nursing Acts should find expression, and, by the kindness of the Rev. H. R. L. Sheppard, M.A., Vicar of St. Martin-in-the-Fields, Trafalgar Square, W.C., this was made easy. It would not have been possible to find a church more suited, both as to position and tradition, for such a service. On Friday evening, January 23rd, a large congregation, chiefly of nurses, assembled at St. Martin's, though one noticed with pleasure Mr. J. McMaster, churchwarden at St. Martin's, Mr. E. J. Domville, M.R.C.S., of the British Medical Association, and Mr. Montague Price, D.L., Chairman of the Trained Nurses' Annuity Fund, representing the Committee of the Fund, and Mrs. Price, amongst those present. Major Barnett, M.P., and Lieut.-Colonel Goodall, Hon. Medical Secretary of the Central Committee for the State Registration of Trained Nurses, who were prevented by important engagements from being present, both sent cheques for the offertory.

### THE RECOGNITION BY THE STATE OF NURSING AS A PROFESSION.

The Rev. A. H. R. Robinson, M.A., Mus.B., who conducted the service, began by giving those present a warm welcome in the name of the Vicar, and said that Mr. Sheppard had hoped to preach himself, but was prevented by indisposition. He announced the intention of the service as that of thanksgiving for the passing of the Nurses' Registration Acts—the recognition by the State of Nursing as a Profession.

### THE BLESSING OF THE BISHOP OF LONDON.

Mr. Robinson further announced that a message had that morning been received from the Bishop of London.

"The Bishop wishes every blessing to the Service that is to be held at St. Martin-in-the-Fields."

### ORDER OF SERVICE.

The Service began with the hymn, "O God our help in ages past," sung with heartiness and fervour, then followed the Lord's Prayer, Versicles, and the Magnificat. The Lesson was taken from Ecclesiasticus xlv: "Let us now praise famous men—honoured in their generations, and the glory of their times. There be of them that have left a name behind them, that their praises might be reported. And some there be which have no memorial; who are perished as though they had

never been born. . . . Their bodies are buried in peace; but their name liveth for evermore. The people will tell of their wisdom, and the congregation will show forth their praise."

As we listened we thought of all the noble men and women upon whose work and example the traditions of the Nursing Profession of to-day have been built up. Not to go back further than the Christian Era, of the Deaconesses of the Early Church, typified by Phœbe of Cenchræa, of whom St. Paul said that she was "a succourer of many and of myself also." Of the Military Nursing Orders of the Middle Ages, of which we still have in this country the direct descendant in the Order of St. John of Jerusalem, located at St. John's Gate, Clerkenwell; of the Religious Orders, such as the Augustinians, who nursed the patients of St. Bartholomew's Hospital until the dissolution of the Religious Houses by Henry VIII; and to come nearer to our own times, of Friedrike Fliedner, Elizabeth Fry, Florence Nightingale, Agnes Jones, Isla Stewart, Isabel Hampton Robb, Edith Cavell, who have "left a name behind them that their praises might be reported," and of countless others, faithful servants of the sick, "which have no memorial," but who held aloft the torch of high traditions which have been handed down to our own times.

Then came the hymn, "Praise my Soul the King of Heaven, To His feet thy tribute bring," with the exultant refrain at the end of each verse,

Praise Him, Praise Him, Praise Him, Praise Him,  
Praise the Everlasting King.

#### THE ADDRESS.

Mr. Robinson, who was in sympathetic touch with his congregation, said that in the course of his ministerial duties he had worked for a time in a large London Infirmary, and he considered it one of the greatest privileges of his life to have been allowed to learn something of the difficulties, the joys, and the opportunities which presented themselves to nurses in their service of humanity and of Christ.

Now the State had recognised that great service by raising Nursing to the status of a profession, and it was that fact which had called those present together, in this Service of Thanksgiving. The Nation had recognised the value of the wonderful and faithful service which nurses had rendered for so many years. Recently he had been reading "A History of Nursing," from which he had learnt a great deal. Even outsiders knew what an enormous change for the better had taken place in the nursing world since Dickens had drawn a picture of the nurse of his day in "Martin Chuzzlewit." Such an improvement and advance could only be attributed to the working of the Spirit of God, and that advance had now been recognised by the State.

In the diverse work of nurses there were great opportunities in all directions. The preacher referred to the work of nurses during the war, and the courage shown not only by those on active service but at home, instancing the work of district nurses in some parts of London. During

the air-raids, they bravely carried on, visiting their patients, when necessary, in spite of the personal dangers they incurred.

#### A CALL TO RE-DEDICATION.

The public recognition now made should be not only for the purpose of giving thanks, but also a call to re-dedication. Fresh opportunities entailed fresh responsibility, and those who served the sick should bind themselves extraordinarily closely to the service of God.

In the story of our Lord's treatment of the leper, nurses had an indication of the way in which their work should be done. "Jesus moved with compassion, put forth his hand and touched him." The touch of compassion should always be associated with professional skill. We must learn how to deal with humanity, remembering always the nobility of the person as he or she might have been. If we asked ourselves what it was God saw in that person, we should be moved with compassion, with the enthusiasm of humanity.

Let each one go forth offering the highest possible thanks, of service done to the persons of the sick as the service of Christ. Let it be the aspiration of each to render still higher service in the future than in the past, to see in each sick person to whom she ministers—Christ, and so to act that her patients may see Christ in her.

Then followed that great Christian hymn of Praise and Thanksgiving, "*Te Deum Laudamus*," and Special and General Thanksgivings.

#### SPECIAL THANKSGIVINGS.

For the recognition by the Nation—in the passing of the Acts for the Registration of Nurses for the Sick—of the necessity and nobility of their service.

For all the earnest work of many kinds, and continuing through many years, which has produced this result.

For the lives of all those faithful workers in and for the Nursing Profession who have passed to their rest before this event was brought about.

Here were specially remembered by name—

Isla Stewart,  
Louisa Stevenson,  
Victor Horsley and  
Daisy Robins.

For all who have been steadfast in face of trial and disappointment.

For all who have had clear and constant vision.

For all selfless work for the community.

For all faithful service of every kind.

The lovely hymn, "At even ere the sun was set," tranquilising and uplifting, was sung while the offertory was collected by trained nurses. The Benediction ended with Stainer's "Sevenfold Amen" gradually rising in volume and dying away to a whisper, and the service concluded on a note of triumph with the hymn—

Now thank we all our God.

Then followed a verse of the National Anthem. As we "came down from the mountain" and passed out into the work-a-day world, one and all felt that it had been "good for us to be here."

It is a comely fashion to be glad,  
Joy is the grace we say to God. M. B.

## THE GENERAL NURSING COUNCIL.

### THE RULES.

Clause 3 (1) of the Nurses' Registration Act provides that the General Nursing Council shall make rules for the following purposes:—

(a) for regulating the formation, maintenance and publication of the register.

(c) for regulating the conduct of any examination which may be prescribed as a condition of admission to the register, and any matters ancillary to or connected with any such examination.

(f) for enabling the Council to constitute committees and for authorising the delegation to committees of any powers of the Council.

Clause 3 (2) rules under this section shall contain provisions:—

(a) requiring as a condition of the admission of any person to the register that the person shall have undergone the prescribed training, and shall possess the prescribed experience in the nursing of the sick; and

(b) That the prescribed training shall be carried out either in an institution approved by the Council in that behalf or in the service of the Admiralty, the Army Council, or the Air Council; and

(c) enabling persons who, within a period of two years apply to come on to the register . . . under conditions which appear to the Council satisfactory.

Before the Rules can be put into force they must be prescribed by the Council, and it is this most important matter which will require very careful consideration and intimate knowledge, not only of general hospital training, but of the work carried on in special hospitals—in Fever, Mental, Military and Naval Hospitals—and it is well that the Acts provide for consultation between the three Nursing Councils, and also that even when defined they must be approved by the Minister of Health and laid before each House of Parliament for not less than twenty-one days before they can be put into operation.

### DUTIES AND POWERS OF THE COUNCIL.

In connection with the above rules, it will be seen that, as soon as the General Nursing Council is appointed, its work will be enormous, and it would be well that those prepared to accept office should realise this. It is not too much to say that the *personnel* of the Council will make for success or otherwise in interpreting the Act:—

### REGISTRATION.

(a) The qualifications, knowledge and personality of the Registrar are of the first importance in the formation, maintenance and printing of the Register.

During the two years term of grace in England and Wales, it is probable that 50,000 nurses will register, and the responsibility of compiling a State Register must be borne in mind. Once placed on the Register, it means professional

ruin to any woman to be removed from it. The utmost care will, therefore, be necessary in (1) verifying the applicant; (2) verifying professional qualifications; (3) verifying personal credentials. For this important work the Council, and not an official, must be ultimately responsible, so that it will be necessary for sub-committees of members to verify carefully every application, certificate and reference, no slipshod methods will suffice. To do their duty in this particular alone will mean hours of conscientious work, if only 25,000 nurses are registered in each of the two years of the term of grace. That would mean roughly enquiring into and passing 500 applications a week! And if 50,000 nurses apply for enrolment on the State Register in the first year—which is not improbable—1,000 must be registered per week! The clerical labour will also be enormous, and a highly skilled contingent of clerks will be necessary, some of whom should also be trained nurses with a sound knowledge of training school routine, and hospital matters, so that they can distinguish professional credentials without loss of time.

Nurses desirous of qualifying for these posts should add clerical skill to that of nursing, and such work should be well paid, and would be eminently suitable for hospital office Sisters and others who have retired from institution life.

The Registration Department would need to be highly organised as an expert unit, as would other departments supervised by the Council.

### EXAMINATIONS.

(c) After regulating the conditions of admission to the Register the Council is empowered to regulate the conduct of examinations which may be prescribed after the term of grace, as a condition of admission to the Register.

This will be a matter of the very utmost importance, and we all know that for years trained nurses have strongly advocated a uniform examination, following on the system now prescribed for midwives. But the uniform examination for Nurses is by no means the easy matter it is as it affects midwifery.

To begin with, the Act provides for four Registers, classified as follows:—(1) General, (2) Male, (3) Mental, (4) Children; so it goes without saying that four different standards of examinations will be necessary. We may take it, however, that for admission to the General Register every nurse will be required to pass the same examination, on certain dates, in defined localities. This is, of course, the only method of encouraging a uniform standard of training and a just system of registration.

There will have to be defined examinations to test the efficiency of male nurses, exclusive of sections of nursing which they do not practice; also of male and female mental nurses, and of nurses trained only in the care of sick children.

These State Examinations will give an enormous impetus to thorough instruction and training in the Training Schools, and will have

a marked effect upon the status of the schools, and arouse keen and commendable rivalry amongst them. We take it that Practical Nursing will, from the outset, be determinedly encouraged, and that the Practical Nursing Examination, conducted, of course, by highly skilled Nurse Examiners, will take a very leading place in the Pass Lists. Theory we must have. No good system of nursing can be evolved which is not based on sound theoretical principles, but everything should be done that can be done through examination, to test and reward practical knowledge, and manual dexterity, in our Registered Nurses; to be. *The comfort, if not the recovery, of the patient depends upon it.*

In the past, when everything was done by rule of thumb, the face, the build, and the hands of candidates for training were realised as assets. We know a Matron who never selected a woman for training who did not *look like a nurse!*

Of late years, when the supply of first-rate candidates has not equalled the demand of our training schools, the best has often had to be made of second-rate material. We are now all looking forward to the splendid future, when the new Profession of Nursing will attract women of refined antecedents, good education and reliable character. It is not too much to say that the General Nursing Councils to be set up under the Nursing Acts will have, to a very great extent, the future of Nursing in their hands. As they sow wisely and tend their saplings, so will grow the tree, so will they bloom and bear fruit. Never will any body of men and women have finer scope for national service than those comprising the First Councils under the Acts, and whoever they may be, they should command all the sympathy and help possible from the nurses in the United Kingdom, whose very devoted representatives and friends it should be their first aim to be.

E. G. F.

(To be continued.)

## ELECTION ON GENERAL NURSING COUNCIL.

We are indebted to the Editor of *The Poor Law Officers' Journal* for many thoughtful expressions of opinion on our professional affairs. It goes without saying that his journal contained an accurate and succinct account of the meeting convened by the Society for the State Registration of Nurses addressed by Dr. Addison, Minister of Health, on January 8th.

Also, the editor refers to our remarks on the question of election on the General Nursing Council. We approve as we have always done of Supplementary Registers of Male and Mental Nurses, but of no other classes of nurses, and we consider that these specialists should vote for direct representatives of their own classes on to the General Nursing Council, so as to secure expert representation, but not for the representatives of the General Nurses on the General Register.

## POOR LAW GUARDIANS AND THE GENERAL NURSING COUNCIL.

At a meeting of the Council of the Association of Poor Law Unions, held at the Connaught Rooms on the 15th inst., a deputation was appointed consisting of the President, Alderman F. J. Beavan, the Rev. P. S. G. Propert, Mr. Munro (Vice-President), Mr. A. Chapman (Hon. Treasurer), and the Secretary, to wait upon the Minister of Health to press upon him the claims of the Association as representing the heads of training schools, to be represented on the General Council constituted under the Nurses' Registration Act, 1919.

As constituted, the General Nursing Council under the Act does not provide for any extensive representation of lay employers of nurses, and as its functions are educational and judicial this is right. The practical heads of the Poor Law Infirmary Training Schools are the trained Matrons, and no doubt this class of nurse will be represented on the Council as she should be. In the near future, what are now termed Poor Law Infirmarys will become more and more hospitals for the sick, and training schools for medical and nursing practitioners, and they should thus be controlled by the Ministry of Health.

There is no valid reason why a Union of Poor Law Guardians, who can know very little of nursing education, and who have no right of jurisdiction over the Nursing Profession as a whole, should have representation on the Governing Body of the Nursing Profession. Such claims are no longer tenable.

## POOR LAW OFFICERS' ASSOCIATION.

At a meeting of the National Poor-Law Officers' Association, held at Norfolk House on the 17th inst., Dr. J. Williams presented the report of the Nurses' Sub-Committee, which dealt with the Nurses' Registration Act. It was stated that as it was an accomplished fact, it could not now be altered, but it rather seemed to suit the Poor-Law Officers' Association. It was a skeleton measure, the new administration being relegated to a Council yet to be established by the Ministry of Health. He explained its constitution as set out in the Act, which his Committee thought gave them a chance of making known the Service view and of assisting in moulding the new body. It was suggested that the Association should apply for three representatives—a justifiable request considering the number of nurses who were members—and it was recommended that Mr. Percival, the Secretary and himself should seek an interview with the Ministry which would in due course appoint the new Council. Their

proposed nominations were the three ladies who represented nurses on that Executive, and the Committee would do their best. He moved the adoption.

Mr. Antcliffe seconded, and after a short discussion it was resolved that the report of the Subcommittee be adopted.

As this Association includes every grade male and female of Poor-Law workers, it can hardly claim a right to representation on the Governing Body of the Nursing Profession any more than on the General Medical Council.

## A HOPEFUL STATEMENT.

### FEVER NURSES AND REGISTRATION IN SCOTLAND.

On behalf of nurses in Edinburgh and district, Mr. William Graham, M.P. for Central Edinburgh, has been in communication with the Secretary for Scotland, with reference to certain points in the operation of the Scottish Nurses Registration Bill.

Mr. Munro writes that it has been assumed in some quarters that the Board's examination of fever-trained nurses is to be continued indefinitely, but that is not the case. The Board are contemplating the issue at an early date of a circular regarding the position of nurses at present qualifying for these examinations, and definitely putting a term to the period during which they may obtain the qualification referred to. The specific mention of the Board of Health's certificates in Section 3 (2) of the Scottish Nurses Registration Act refers only to the first register, and is considered necessary for safeguarding the position of nurses examined and certified by the Board.

## THE NURSES' OWN CLUB.

We are glad to learn that the article on "The Nurses' Own Club," by Her Royal Highness Princess Christian, which appeared in our last issue, in the Supplement of the Royal British Nurses' Association, has aroused a great deal of interest, and the scheme is likely to receive much support from members of the Nursing Profession, especially from those resident in London. In this connection it is valuable to know what has been done in other countries, and the article we reprint from *The Modern Hospital* will, we feel sure, be read with great interest by those nurses who are anxious to further a Nurses' Club in London of their own.

### CENTRAL CLUB FOR NURSES.

The beautiful home of the Central Club for Nurses, New York City, is the outcome of a dream which at first threatened to be a nightmare. In 1910 the club opened on Thirty-fourth Street in a club house improvised out of two converted

dwelling houses. A better home was desired but scarcely hoped for. In 1913, when the Young Men's Christian Association and Young Women's Christian Association opened a joint drive for funds, the latter organisation offered, in return for support by the training schools, to devote a certain part of the funds obtained to the erection of a nurses' club house. There was much objection from within the ranks of the nursing profession. It was prophesied that so many women would never choose to live under one roof; that the club could never be made self-supporting; that it would be tainted with charity, and therefore objectionable to the self-sustaining and self-respecting professional women.

The drive, however, was carried to a successful completion, and \$400,000 (£80,000) of the \$4,000,000 obtained was devoted to the erection of the club house at 132, East Forty-fifth Street. The building, which was opened July 1st, 1916, contains rooms for 250 resident members, who must be actively engaged in their profession; they enjoy all the privacy and independence and much of the service that they would have in a good hotel, while at the same time they have a home-like, congenial atmosphere. Other privileges are at the service of resident and non-resident members. Among these are private and public dining-rooms, cafeteria, tea rooms, library, committee and reception rooms. A spacious and attractively furnished assembly room is at the service of outside groups, such as training schools, for social gatherings on payment of a small fee to cover expenses. There is a charming little rest room, with dressing rooms opening off from it, where an out-of-town member, coming into town to attend a dinner or the theatre, may slip into a kimono and rest for a while on the couch before making her toilet for the evening. Non-resident members have the privilege of twenty-eight days' stay at the club as transient guests.

Any graduate of a recognised training school for nurses with a course not less than two years, if her application is properly endorsed, may become a member of the club on payment of one dollar initiation fee and one dollar yearly dues. The charge for rooms is, to residents, \$15.50 to \$19 a month for single bedrooms, and \$13 and \$14 a month to each occupant of a double room. These charges are to be increased by a dollar a month next year. Transients pay \$1 a day or \$7 a week.

It seems almost incredible that such accommodation can be offered in a central location in New York City at such a price on a self-sustaining basis. Yet the income of the club has been sufficient not only to meet all current expenses but also to provide for a small depreciation fund. This, however, is possible only because the club has no rent or taxes to pay. The ownership of the building is vested in the Young Women's Christian Association, and it is therefore not subject to taxation. The club pays to the association 4 per cent. of its gross receipts, but this is much less than rent would be.

The membership of the club has increased nearly 300 per cent. in three years. In 1916 there were 500 members; now there are 1,900, and nearly every state in the Union is represented. During the war, the club kept open house for all nurses passing through New York on their way to embark for duty on the other side, and many of these nurses, on their return, have shown their gratitude and desire to be connected with the organisation that had stood as a "big sister" to them during the past season of tribulation. The club is managed by a committee of thirty women, of whom fifteen are professional and fifteen non-professional. The non-professional members are selected by the Young Women's Christian Association. Each of the large New York hospitals is represented among the professional members.

The New York State Board of Nurse Examiners (Registration Board) and the central registry of the New York County Registered Nurses' Association have their offices in the building.

Nothing approaching the home has ever been given to the nursing profession. It has been an almost priceless boon to many nurses who without it would be compelled to live in dreary, uncongenial uncomfortable surroundings. "The club seems too good to be true," is the verdict of one and another who have experienced the hardships of life in other surroundings. To its non-resident members it is, at need, a "haven of rest." The club has furnished a model, also, for similar undertakings in other communities.

### NATIONAL HEALTH INSURANCE.

Weekly National Insurance contributions are to be increased. Such is the proposal of the Government, who are revising payments and benefits.

A Bill to give effect to their proposals, says the Ministry of Health, is to be introduced into Parliament at the first opportunity. Here is the scheme:—

#### CONTRIBUTIONS.

to be increased by 3d (both sexes), 2d. of which is to fall on the employer and 1d. on the worker.

#### BENEFITS.

Sickness benefit to be increased to 15s. (men) and 12s. (women).

Disablement benefit 7s. 6d. a week for both men and women.

Maternity benefit to be increased from 30s. to £2.

Sanatorium benefit to be removed from the Acts, the treatment (other than domiciliary) of tuberculosis, both among the insured and the uninsured, being recognised as falling within the province of the local authorities.

A State system of medical referees is to be established, towards the cost of which the societies will make a small contribution by way of payment per case referred.

Thus employers of nurses will have to pay £1 1s. 8d. per head annually, the nurses themselves

paying 17s. 4d. This is very serious for the hospitals, the exchequers of which are already depleted to vanishing point.

Also private nurses working on the co-operative  $7\frac{1}{2}$  per cent. system—a percentage arranged before either the Employers' Liability Act, or the National Insurance Act were in force—must look forward to paying an increased percentage, or remaining out of insurance—as they are permitted to do—as their earnings at £3 3s. a week with board, lodging and washing are assessed at £250 per annum.

We have always encouraged nurses to insure, feeling the State would, by degrees, raise the sick benefit from time to time. This is now to be done, the sick benefit to be 12s. instead of 7s. 6d. a week, and by-and-by it will be more. But private nurses must realise that as the cost of insurance, clerical work, rent, rates, taxes, stamps, printing, light, heat, and labour have increased enormously the old rate of  $7\frac{1}{2}$  percentage cannot keep up a first-class private nursing co-operation in London, and insure the staff under both Acts. It cannot be done. The coming insurance rate is the last straw.

### A SAD FATALITY.

With the head practically severed, the dead body of a young nurse, Miss Alice Lilian Warner, aged 24, employed at Lancashire County Asylum, Whittingham, has been found in the County Council branch railway track near Brabiner Lane Bridge, Preston.

### LEGAL MATTERS.

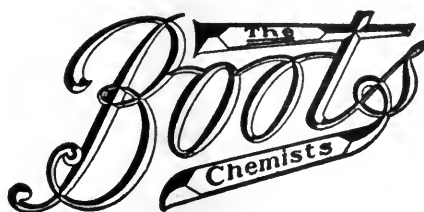
At Northampton Assizes, last week, before Mr. Justice Horridge, Emily Kathleen Church (23), a probationer nurse, pleaded "Guilty" to concealment of birth at Wellingborough.

Miss Tuke, matron at the Cottage Hospital at Wellingborough, said that Church had been at the hospital for two years, and had an extraordinarily good character.

His Lordship, in pronouncing judgment, said that his own inclination would be to release the prisoner on her own recognizances, but he had a duty to the State and to the position he occupied. It was not a case of a poor and friendless girl. Kindness was shown nowadays to unmarried mothers, and if the prisoner had told people of her trouble she could have enlisted their sympathy. Concealment of birth was a serious matter, especially in these days when, he was afraid, there were a great many illegitimate births. It was in the interests of the State that those births should be known. It might be that, had the prisoner sought assistance and had attention, the child might have been born a citizen of the State. Women must understand that they were pitied—and rightly pitied—when they were in the position that the prisoner was in, but that position was no justification for concealment of bringing a human being into the world. He could not pass the case without



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555 BRANCHES THROUGHOUT THE COUNTRY.

SIR JESSE BOOT,  
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sentence, and the prisoner must go to prison for six weeks without hard labour.

Much as we sympathise with the terrible distress of mind of an unmarried mother, we live in hope that in the future women will place their maternal duty before every other consideration in the world, and realise that to desert or injure or cause the death of their illegitimate children is a far greater crime than to beget them. Let the community learn this lesson also, especially where poor girls are concerned.

## APPOINTMENTS.

### MATRONS.

**Nerve Hospital, Birmingham.**—Mrs. Gladys M. E. Jones has been appointed Matron of the In-patient Department. She was trained at Guy's Hospital, S.E., and at the Royal Eye Hospital, and held various responsible appointments before going out to France to work with the French Red Cross. She also nursed interned British officers at Murren under the British Red Cross during the war.

**Oakdale Workmen's Hospital, Blackwood (Mon.).**—Miss Hilda Price has been appointed Matron. She was trained at the General Infirmary, Oldham, and has held the positions of Sister at the Wrexham Infirmary, Theatre Sister at Bury Infirmary, and at the Jessop Hospital for Women, Sheffield, Matron of the Ebbw Vale Workmen's Hospital, Swindon, and at the Cottage Hospital, Winchcombe. She has also had experience of military nursing.

**Cottage Hospital, Bexley Heath.**—Miss Beatrice Alcock, A.R.R.C., has been appointed Matron. She was trained at the Coventry and Warwickshire Hospital and has since been night superintendent at the Royal Hospital, Richmond, Surrey, sister at the Kendray Hospital, Barnsley, at the Royal Infirmary, Penzance, sister and deputy matron at Stroud General Hospital, and sister-in-charge, Park Lodge Nursing Home, Brockley. Miss Alcock served with the T.F.N.S. during the war, and was acting matron of the Manoel Hospital, Malta.

**Ruthin Hospital.**—Miss Irene L. Jones has been appointed Matron. She was trained at the Bootle Borough Hospital, where she was also Sister and Matron's Assistant. After holding other posts, she was successively Matron of the Leaf Hospital, Eastbourne, the Liverpool Skin Hospital, and the Cottage Hospital, Mold.

**County Borough Maternity Hospital, Swansea.**—Miss Elizabeth Crompton has been appointed Matron. She was trained at the Royal Infirmary, Manchester, and has been Sister-in-Charge of the maternity block and labour ward of the Willesden Municipal Hospital.

**Booth Hall Infirmary, Blackley, near Manchester.**—Miss Ethel Ashton has been appointed Matron. She was trained at Crumpsall Infirmary and has been First Assistant Superintendent of Nurses at that Institution.

### SUPERINTENDENT NIGHT NURSE.

**Hackney Union Infirmary.**—Miss Annie Robinson has been appointed Superintendent Night Nurse. She was trained at North Bierley Infirmary, where she was promoted to be Sister. She has also been Night Sister at the Municipal Maternity Hospital, Rochdale, and Charge Nurse (Sister) at Hackney Infirmary.

### SUPERINTENDENT NURSE.

**Barton-upon-Irwell Union.**—Miss Ann Dolan has been appointed Superintendent Nurse. She was trained at the West Derby Union Institution, and has held the position of Sister and Night Superintendent there.

**Selby Union.**—Miss Gertrude I. Whiffen has been appointed Superintendent Nurse. She has had many years' experience, and recently worked at the Lord Derby War Hospital, Warrington.

## LECTURES ON TUBERCULOSIS.

A course of Lectures on Tuberculosis (winter session), will be given at the Hospital for Consumption and Diseases of the Chest, Brompton, S.W.3, on Tuesdays and Fridays, at 8 p.m., during February, March and April, commencing on February 17th. The lectures include a large variety of subjects, by well known experts, and the fee for the course is £1 1s. Single lectures, 2s. "The Home Nursing of Tuberculosis" will be dealt with by the Matron, Miss F. T. Redl.

## BOOK OF THE WEEK.

### "THE TIN SOLDIER."\*

There is something fresh and spontaneous about this American tale—incidents connected with the war—which will be sure to make its appeal to lovers of light fiction. It has many points of originality and one must perforce be attracted to Miss Emily in her toy shop. At closing time it was a labour of love for her to put the dolls to bed, to lock the glass doors safely on puffy rabbits, woolly dogs, and round-eyed cats, to close the drawers on the tea-sets and Lilliputian kitchens, and to shut into boxes the tin soldiers. But she took the great white plush elephant home with her. There had always been a white elephant in Miss Emily's window. Painfully, she had seen her supply dwindle. For this last of his herd, she had a feeling far in excess of his value, such as a collector might have for a rare coin, or a bit of pottery of pre-historic period. He had been made in Germany.

She had not the heart to sell him. "I may never get another. And there are none made like him in America."

Pretty Jean was devoted to Miss Emily and was generally to be found with her in the shop though she lived with her father in a more fashionable quarter of the town. She was his only child, and he was a nerve specialist of repute.

Jean would have dearly loved that Miss Emily should find a place in her father's household, but Hilda Merritt had lived there for some years. She was a trained nurse, who, having begun life as the doctor's office-girl, had, gradually after his wife's death, assumed the management of his household. She was handsome in a red-cheeked, blonde fashion.

Hilda is really a cleverly-drawn character and

\* By Temple Bailey. Skeffington & Co.

a very unpleasant one. She has a certain influence over the doctor of which he was aware, but did not dislike. He humorously described himself as having two personalities when with her—a sort of Dr. Jekyll and Mr. Hyde; but his love for his little daughter delayed the making of Hilda's position the permanent one that she desired. She was a good housekeeper, and saw the doctor's needs were satisfied.

Jean's remark that "food on such a night as this seems superfluous," was met by her father's smiling remark: "Hilda knows better, don't you, Hilda?"

"She was bringing in the tray. There was a copper chafing dish and a percolator. She wore her nurse's outfit of white linen. She looked well in it, and she was apt to put it on after dinner when she was in charge of the office."

Hilda smiled at him. "You see, I have lived longer than Jean. She'll learn."

But Hilda shortly after found bigger game than Dr. McKenzie. At his request she went to nurse General Drake, the multi-millionaire, whose son Derrick gave rise to the title of the book.

The old General was addicted to drink, and it was to save him from himself that Derrick, obeying the entreaty of his dead mother, hung back from joining up, and earned the unmerited title of coward.

The introduction of a trained nurse to look after his old master was not in itself displeasing to the old servant, Bronson, but he ventured the remark to Derry,

"I am not sure I like the nurse, sir."

"Why not?"

"She's not exactly a lady, and she's not exactly a nurse."

"I see. But she's rather pretty, Bronson."

"Pretty is as pretty does," sententiously.

It was certainly not pretty of Hilda to satisfy the old man's craving for spirits, and to try on his dead wife's jewels at night, when she had been entrusted with the key of the safe.

"As she passed through the hall she stopped for a moment at the head of the stairs. The painted lady smiled at her, the pictured lady who was loved by the old man in the shadowed room. Hilda was not a thief, but she had it in her mind as she stood there in the cold dawn of that Thanksgiving morning to steal from the painted lady things more precious than a pearl collar or an ermine cloak or the diamonds in a crown."

Her greed, however, defeated its ends, and the old General was saved by what he saw through the crack in the door, she standing before his wife's mirror, wearing his wife's jewels, wrapped in the cloak his wife had worn—triumphant—beautiful!

It is a sorry picture of a trained nurse. "He wanted someone with him who—cared."

Handsome Derry and pretty Jean's love idyll reaches a happy conclusion, and Derry, in spite of his new and dear tie, realises that he must justify his manhood and join his comrades at the front.

Their wedding day was one of great domestic events. Hilda's downfall—the old man's fatal

seizure—the postponement of their honeymoon. It was all so different from what one might expect. They dined in the great room, where Derry's ancestors gazed down on them.

"I can't believe that the lovely, lovely lady at the other end of the table is my wife," Derry told Emily.

Jean smiled at him over a perfect thicket of orchids.

"Shall I always have to sit so far away from you, Derry?" she asked in a very small voice.

"My dearest, no," and he came and shamelessly drank out of the little coffee cup that her lips had touched before the eyes of romantic and sympathetic Miss Emily.

H. H.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### THE DIGNIFIED WAY.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The Nation's Fund would do well to imitate the dignified way which the "Trained Nurses' Annuity Fund" manages its benevolent appeals.

It never hurts the nurses' feelings by street appeals or by running shops for them, and its annuitants are treated with the greatest courtesy in every detail.

Believe me,

A GRATEFUL ANNUITANT.

### KERNELS FROM CORRESPONDENCE.

*Scottish Red Cross Nurse*: "I note that typhus fever is raging throughout a great part of Poland and Western Russia, and that there is plague in Moscow. What is being done by the Nursing Section of the International Red Cross Society? If nothing, why? Where is the splendid humanitarian spirit which animated the world in 1914, when the National Nursing organisations were to be found helping the helpless on every front? We want another Elsie Inglis—but such fine spirits are rare."

### OUR PRIZE COMPETITIONS.

#### QUESTIONS.

*January 31st.*—Describe the Psychic Temperament and its place in Progressive Evolution.

*February 7th.*—What should a Nurse know about Venereal Diseases?

*February 14th.*—What conclusions might be drawn from a patient's posture in bed?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

The Monthly meeting of the Central Midwives Board was held at 1, Queen Anne's Gate Buildings, Thursday, January 22nd, Sir Francis Champneys presiding.

Letters were received from Dr. Stookes, addressed to the Chairman of the Board, Dr. Fothergill and Dr. Fletcher Shaw with reference to the Resolution of the Board at its last meeting that the teaching of responsible authorities must be accepted by examiners, and the draft of a letter which the Chairman proposed to send to Dr. Stookes was approved.

A letter was received from the Chairman of Queen Mary's Hospital for the East End referring to the position in which the authorities of the Hospital find themselves owing to no teacher of pupil midwives having been approved by the Board, and asking the Board to assist them. The Board approved the draft of a letter submitted by the Chairman.

The Board also decided on a reply to a pupil midwife at that hospital who wrote asking the advice of the Board as to her position, in consequence of there being no trainer of midwives at that institution. It decided to permit two pupil midwives to count the lectures, time and cases already to their credit, but to inform them that any further training and cases which may be necessary to enable them to sit for the Board's Examination must be taken elsewhere under an approved teacher.

The Secretary reported the result of a Conference between representatives of the Central Midwives Board, the Ministry of Health, and the Board of Education. The conclusions arrived at by the members of the Conference were approved.

### APPLICATIONS.

The following applications were granted:—

*For Approval as Teachers (Medical Practitioners).*—Mabel Emily Gates, M.D.; Thomas Oates Halliwell, M.R.C.S., L.R.C.P., D.P.H.; Alexander George Hamilton, M.B.; Frank Graham Lescher, M.B.; Charles Edward Potter, M.D., and William Hudson, M.D. (pro hac vice).

*For Approval as Teacher (Certified Midwives).*—Alice Walkling, No. 32,814; Frances Annie Wood, No. 33,295; Elizabeth Prince (pro hac vice).

### ALTERATION IN FORM OF QUESTIONS.

On the recommendation of the Standing Committee the Board decided that certain alterations in and additions to the Forms of Questions to be answered by institutions applying to be fully recognized for the purpose of training pupil midwives, and by persons applying for approval as lecturers to or trainers of pupil midwives be made, and that the Forms, as submitted, be approved.

## CERTIFICATION OF SCOTTISH AND IRISH MIDWIVES.

The applications of seventeen Scottish and Irish midwives to be certified under Section 10 of the Midwives Act were granted conditionally upon the payment by each one of the fee of one guinea.

### PENAL CASES.

A special meeting of the Central Midwives Board was held at 1, Queen Anne's Gate Buildings, Westminster, on Thursday, January 22nd, at 10.30 a.m.

Sir Francis Champneys moved, and it was agreed: "That the Resolution of the Board at its meeting of April 16th, 1919, directing the Secretary to remove the name of Lucy Smith, No. 30861, from the Roll of Midwives, and to cancel her certificate, be, and is hereby rescinded."

After hearing the charges alleged against the following certified midwives, the Board directed the Secretary to remove their names from the Roll and to cancel their certificates.

Sarah Edge (No. 9894), Harriet Summerell (No. 16432).

## ALCOHOL AND INFANCY.

The National Baby Week Council (17A, Cavendish Square, London W. 1) has published in leaflet form an address on "Alcohol and Infancy," by Dr. C. W. Saleeby, M.D., F.R.S.S., F.Z.S., Chairman of the National Birthrate Commission, which was originally given at the annual meeting of the above Council in October of last year, and has now been revised and amplified for publication. Like all that Dr. Saleeby writes on this and kindred subjects, it is extremely well worth reading. It may be obtained from the Secretary at the above address price, including postage, 3d. for a single copy, or 2s. per dozen.

## ROBINSON'S "PATENT" BARLEY.

As most nurses and midwives know—dried, or condensed, milk is milk from which the water has been extracted, and, by the addition of water according to the instructions given, the milk is reconstituted.

A great difficulty of feeding an infant on cow's milk is the large curd formed in the stomach, as the proportions of the component parts of cow's milk differ from those of human milk, and a solid and undigestible mass of curd forms in the infant's stomach. The same difficulty occurs with condensed milk reconstituted with water. This may be overcome by reconstituting the condensed milk with barley water made from Robinson's "Patent" Barley (Keen, Robinson & Co., Ltd., London, E. 1). The effect of the barley is to separate the curd of the milk, thus rendering the latter digestible, even by delicate infants.

# THE BRITISH JOURNAL OF NURSING

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EDITED BY MRS BEDFORD FENWICK

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## EDITORIAL.

### INFLUENZA.

The Ministry of Health is proving its value to the community by the manner in which it is keeping the public informed as to the considerable probability of another wave of influenza developing in this country at an early date.

The Ministry draws special attention to the Memorandum on the Prevention of Influenza issued to local authorities last month, and also emphasises the following matters for public guidance.

Influenza is particularly infectious during its incipient stage, and while the person who has contracted it is still able to follow his avocation and to mix with his fellowmen. Almost everybody, therefore, is exposed to infection at one stage or another of an epidemic. Whilst no certain safeguard against the disease is as yet known to exist, it is important to give attention to the following during an epidemic wave.

### PREVENTION.

Infection may be guarded against by :—

(a) Healthy and regular habits, and avoidance of fatigue, chill, alcoholic excess, crowded meetings and hot rooms, and unnecessary travelling.

(b) Good ventilation in working and sleeping rooms.

(c) Warm clothing;

(d) Gargling from a tumbler of warm water, to which has been added enough permanganate of potash to give the liquid a pink colour.

### VACCINATION.

A vaccine against influenza has been prepared by the Ministry of Health, and is available for general use. It is issued to Medical Officers of Health for distribution, free of charge, among Medical Practitioners within their districts, and any person who wishes to be vaccinated should apply to his private medical

attendant. To obtain its value the vaccine should be used before the epidemic occurs. It cannot be guaranteed that the vaccine will necessarily protect from attack, but there is reason to expect that if an attack occurs, vaccination will do much to lessen the risk of complications. Influenza is dangerous mostly because of what may follow it.

### CURE.

In the event of an attack of influenza the patient is advised to adopt the following measures with a view to securing a speedy return to convalescence and avoidance of complications :—

(a) At the first feeling of illness, or immediately on a rise of temperature, the patient should leave his work, go home and go to bed; he should keep warm and send for the doctor.

(b) On convalescence, the patient should avoid meeting-places and places of entertainment for at least one week after his temperature has become normal.

(c) Recovery should be fully established before return to work.

### ADVICE TO PERSONS NURSING INFLUENZA.

(a) The patient should, if possible, occupy a separate bedroom, or a bed screened off from the rest of the room. This rule should be observed until the temperature is normal; (b) the patient should be kept warm; (c) all curtains and other articles which prevent a free circulation of the air about the patient's bed should, as far as possible, be removed; (d) inhalation of the patient's breath should be avoided; (e) a handkerchief or other screen should be held before the mouth, and the head should be turned aside while the patient is coughing or sneezing; (f) the hands should be washed at once after contact with the patient.

Forewarned is forearmed, and nurses can render useful service by spreading knowledge in regard to the precautions advisable.

## OUR PRIZE COMPETITION.

### DESCRIBE THE PSYCHIC TEMPERAMENT AND ITS PLACE IN PROGRESSIVE EVOLUTION.

We have pleasure in awarding the prize this week to Miss Isabel Macdonald, 10, Orchard Street, London, W.

#### PRIZE PAPER.

When one grips a pen and faces a sheet of blank paper for this week's question one is faced with a very elusive subject. The psychic temperament is of the nature of "an unknown quantity." It is, indeed, largely a matter of degree, and probably psychic qualities are inherent in every individual, although their possessor may be unconscious of them. In its most primitive aspect the psychic temperament might be described as the suppression of the intellect and of the objective sense; in its highest form it implies the spiritualisation of the intellect. But, between the two stages, except in the cases of such world wonders as a Raphael, a Joan of Arc, or a St. Francis of Assisi, there lie aeons of evolution. Unfortunately now there is a tendency to regard psychic power as claiming a development which suppresses, or is divorced from, the intellect and from common-sense, but, according to certain views which I shall refer to, this tendency is distinctly retrograde, and the path it follows is beset with many dangers. The psychic temperament, if it is to play its appointed part in evolution, must develop in line with the intellect, for only thus can it reach that stage of intuition and inspiration of which it is capable.

But more is required. He who would develop his psychic powers to their full extent—a stage far beyond the simple power to sense another's consciousness or one of primitive clairvoyance and clairaudience—must be able to free himself from egoism, must be able to put the welfare of the community before his own. It is only through the wide sympathy with humanity which such an attitude brings that the psychic temperament can become a real force. So harnessed to the intellect and to the welfare of the world at large it has made many a saint, many a mystic, many a martyr, and many great reformers. It has formed the link between life and matter that has given to us many a leader of men, leaders, it sometimes may have been, of forlorn hopes in their own time, because their vision had advanced beyond that of their generation. In the realm of literature we owe to the psychic quality those great classics in which inspiration transcends the intellect; while, in the material world, it has given us

treasures of art beyond all price. Yet this same psychic quality, when not balanced with the intellect, has also given to the world many fanatics and fools, and, when bound up with egoism and self-interest, has produced what, in the middle ages, came to be known as "black magic." It may be that the future evolution of man lies in finding the proper balance between the psychic and the intellectual, and those who come near to this never grow old, for they are always on the breast of evolution, though sometimes their path may be rough, like the hill roads.

If certain writers are correct in their view that psychic powers—in the sense of clairvoyance and clairaudience—are more apparent in the most recently civilised races, this points to the assumption that the psychic temperament is the natural possession of mankind. A study of comparative religions and the old Scandinavian or Greek mythologies tends to confirm this conclusion. And it is quite in line with the progress of evolution that we should have lost the power to "sense" the superphysical, otherwise man would have remained a creature subject to every influence from without, and with no inclination to develop a mind or individuality of his own or to conquer the world of matter.

One would like to follow the subject of this paper into many tracks. I have been able to touch only the fringe of a question of which, after all, we know no more than we do of meteorology.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Gladys Tatham, Miss Lilian Hayward, Miss Mena M. G. Bielby, Miss M. James.

Miss M. M. G. Bielby writes:—"Those who sometimes long to hurry forward evolution should remember that one cannot save people experience, and that in the vast majority of cases the only effectual teacher is pain. Highly advanced egos continually learn through the mind, assimilating the wisdom offered by others. But most must learn their lessons in their own way, and all we can do to help is to break their falls when possible, and tender them our compassion instead of our censure; and to ensure that the environment, the pressure of which few can resist, is made as uplifting as we can compass."

#### QUESTION FOR NEXT WEEK.

What should a nurse know about Venereal Diseases?



## NURSING ECHOES.

It is felt on all sides that some permanent memorial should be raised to perpetuate the memory of Florence Nightingale Shore, who succumbed to the brutal injuries she received whilst in a train on her way to Hastings.

The present Home of the Hammersmith District Nurses, Carnforth Lodge, at which Miss Shore lived, the Matron of which, Miss Rogers, was her close friend, has been sold, and the nurses will have to find other quarters. It is proposed that the new building should be called after Florence Nightingale Shore, and should combine with the nurses' home a children's treatment centre and a clinic for disabled soldiers, which would be a memorial to Sister Shore's work during the war. In addition, one room in the Home, containing mementoes of her life and work, would be set apart as a guest room for Queen's Nurses, so that any member of the Q.V.J.I. might feel that she could come there at any time for a night or two. Miss Shore was a Queen's Nurse, having been enrolled in 1898, and in forming this project her friends are carrying out what they know would have been Miss Shore's own wish, as she was conversant with the impending change, and had expressed her intention to help personally in carrying it through.

The money needed for the building will be raised by means of a shilling fund, thus enabling the general public to contribute to it, but any number of shillings may be given by any individual.

Contributions to the fund, marked F.N.S. Memorial Fund, should be sent to the Hon. Treasurer, 22, St. Peter's Square, Hammersmith.

The Poor Law Nursing Service is anxiously watching events and hoping for reform. It is understood that Dr. Addison will introduce the new Poor Law Bill which the Government has been drafting. It will be a tougher job even than Housing. We all know how determined Boards of Guardians are, not to be demobbed, and at the Central Poor Law Conference to be held at the Guildhall on February 10th and 11th, the strong feelings of those who believe that local and personal effort should not be superseded by a centralised administration will be very bluntly expressed.

The Conference will supplement the discussion at a similar meeting over which Lord Downham presided last February. As a result of that conference a deputation, representing all the Poor Law bodies in the country, asked Dr.

Addison to appoint another Royal Commission to inquire into the present state of the administration of public assistance, but the request was refused on the ground that circumstances did not permit of a further general inquiry into the matter.

The standards of nursing to be evolved by the General Nursing Council will no doubt have a marked effect on nursing in Poor Law Infirmarys. We see a very bright future for the sick in these institutions if all the wonderful improvements possible in our Poor Law Infirmary Training Schools are carried out. The Matrons and Nurses have done wonders as it is. With better organisation they will show still further what they can do.

Special regulations have been made for the reception for a shortened term of training, at King's College Hospital, of candidates who have been trained in a Children's Hospital. Candidates must have satisfactorily completed a term of not less than three years' training in a Children's Hospital with a recognised training school, and be well recommended by their Matron. They must, before being accepted, pass the examination in elementary subjects to which the probationers of King's College Hospital are submitted at the end of their first year. This examination is held twice yearly: in March and September. On admission to the Training School, their rank and salary will be those of second year nurses. They must later on pass the final examinations, in order to gain the hospital certificate. The certificate is given on completion of the three years of training. The salary given is:—In their first year, £15; in their second year, £20; in their third year, £30.

Thus a woman trained in a Children's Hospital must in all serve for six years before she is eligible to have her name placed upon the General Register under the Act. We wonder how many girls will give all this time, when V.A.D.'s can in two years qualify as Health Visitors. Unless reciprocal training is shorter, girls will not train at Children's Hospitals at all. The full combined course should not exceed four years.

Sir Henry Burdett, editor of the *Hospital*, and *Nursing Mirror*, and also a member of the Nurses' Co-operation—from whose policy the more intelligent Nurses on the Staff differ—uses his papers for making his own deductions in the recent controversy, and is highly elated

that a large majority of the nurses have fallen into the trap laid for them. The incorporated laymen and others who are "members" of the Co-operation, and control its finances, suggested closing down the business—a splendid one, entirely built up by the work of the nurses. The progressive minority, quite naturally in these enlightened days, wish to be *members* of their own Co-operation, and have power to manage it. This would not please the lay proprietor and editor of nursing publications at all.

So a very disingenuous question was addressed to the Nurses, inviting them to say "Yes" or "No" to whether they wished the "Co." to close down, and naturally the large majority replied "No." Why should they wish to be deprived of work and a livelihood?

Had the "Members" honestly invited a reply to the question, "Do you wish to be Members of your own Co-operation, and have power to manage your own affairs?" we have no doubt the majority of votes would have been in favour of so doing. As it is, the Nurses, no doubt in their ignorance, and having been thoroughly misled, have elected to remain the servants of the incorporated "Members." It is high time this intolerable lay interference was put down, especially when, as in conducting so-called Nursing periodicals, cash and power accrue to these philanthropists.

We note Sir Henry Burdett states that letters have been received "from nurses" urging that the leaders of the agitation should be removed from the staff. We do not advise him to attempt to carry out this suggestion, especially whilst the writ issued against him by one of these "agitators" is *sub judice*. The present wholesale exploitation of nurses has got to cease. May we live to see it.

A Mass Meeting, convened by the Professional Union of Trained Nurses, will be held at the Scottish Nurses' Club, 205, Bath Street, Glasgow, on February 14th, at 2.30 p.m., to discuss the Professional Union for the mutual help and protection of Trained Nurses. The notice states:—Every Trained Nurse must feel at the present moment the insecurity of her position with regard to earning a livelihood. Nurses are cordially invited to attend and bring their friends.

Princess Helena Victoria, who has promised to distribute badges to members of the League of the Roses at the Great Northern Central Hospital, Holloway, on Thursday, February 12th, at 3 o'clock, will be received by the Marquis of Northampton (Hospital Chairman), Miss M. F. Roby (League Chairman), and members of Hospital and League committees.

## THE MATRONS' COUNCIL OF GREAT BRITAIN AND IRELAND.



The Annual Meeting of the Matrons' Council was held by kind invitation of Mrs. Walter Spencer, at 2, Portland Place, W., on Thursday January 29th, at 3 p.m.

The President, Miss Heather-Bigg, R.R.C., was in the chair, and there was a good attendance of members.

The President opened the meeting by offering Mrs. Spencer, on behalf of the members, an expression of gratitude for her kind hospitality, and said it was very appropriate that the Council should meet to celebrate

the passing of the Nursing Acts in the house of a pioneer supporter of the State Registration of Nurses, and who had held office as Hon. Treasurer for so many years.

Several new members were elected. Miss Euphemia Ross, Matron of the Western Fever Hospital, Fulham, and Miss Helen Pearce, Superintendent of the London County Council School Nurses, were elected to fill the two vacancies as Vice-Presidents.

Miss Villiers and Miss A. E. Hulme, were re-elected Hon. Treasurer and Hon. Secretary respectively for the ensuing year.

After interesting discussion on various questions, Mrs. Bedford Fenwick spoke on "The Nurses' Registration Act: The Powers and Duties of the General Nursing Council," and was listened to with very great interest. One point was made very clear. The Acts conferred great responsibility upon, not only the members of the Council, but on the registered nurses who would form the Nursing Profession in the future, and that its future honour and status would rest in their hands. That it would be the duty of the whole profession, once the Rules had been prescribed and agreed to, both by the Minister, and Parliament, to take a vigilant interest in the standard of Nursing Education and Examinations, the correctness of the Register, and the purity and high moral tone of the profession. Mrs. Fenwick warmly congratulated the Matrons' Council on its unflinching support of the ethics of registration, from its inception until this day. From 1895 to 1902, it was the only nurses' organisation upholding the State Registration Banner—when it evolved the Society for the State Registration of Trained Nurses, so that the nurses with vision, as well as the matrons, might concentrate their political efforts. The Council must not only be congratulated on the good things in the Act, but also on the fact that the bad things proposed had been excluded.

Some interesting questions were asked, and

keen interest evidently felt by those present in the future evolution of nursing.

#### A DANGER TO PROFESSIONAL STATUS AND ECONOMIC INDEPENDENCE.

The gist of the following emergency Resolution was passed unanimously, and a rider added that it should be sent to the Secretary of State for War, the First Lord of the Admiralty, the Minister of Health, and the press:—

The Matrons' Council of Great Britain and Ireland, in Annual Meeting assembled, desires to place on record the very strongest protest against the action of the "Daily Telegraph" in opening a "Shilling Fund" "For our Nurses," and appealing to "every soldier, every sailor, every one who served his country in an auxiliary force, as in the women's uniformed services," thus depreciating the professional status, and endangering the economic independence, of the Nursing Profession.

After a meeting of two hours, which seemed all too short, the members availed themselves of Mrs. Spencer's kind invitation to tea, and a very pleasant hour was spent in recalling "old campaigns," which had resulted in victory, and in congratulating the older members who had for so many years helped to safeguard the rights and liberties of the nurses.

ANNIE E. HULME, Hon. Secretary.

#### POOR LAW INFIRMARY MATRONS' ASSOCIATION.

A very well attended meeting of the Poor Law Infirmary Matrons' Association was held on January 31st, at the Eustace Miles Restaurant. Much interest was taken in the discussion of arrangements for shorter hours, and other problems and better conditions generally for the Nursing staffs. A hearty vote of thanks was unanimously passed to Dr. Addison, Minister of Health, for the passing into law of the Nurses' Registration Acts.

#### VOTES OF THANKS RE REGISTRATION.

At a recent meeting, the Central Committee for the State Registration of Nurses, Sir Thomas Jenner Verrall proposed from the chair a hearty vote of thanks to Lieut.-Col. Goodall, M.D., O.B.E., Medical Hon. Secretary, and to Mrs. Bedford Fenwick, Nurse Hon. Secretary, for their valuable services during the ten years they had held office.

At a recent meeting, the Legislation Committee of the National Council of Women of Great Britain and Ireland expressed a feeling that "a debt of gratitude was due to Mrs. Bedford Fenwick for her untiring labours in the cause of registration." It was agreed to recommend to the Executive Committee that a vote of thanks should be sent to the Minister of Health for his efforts to secure an agreed Bill.

#### THE AMERICAN GOVERNMENT DOES ITS DUTY.

The American Government is setting an example in the treatment of its nurses discharged from military service, who are sick or who require hospital treatment as the result of illness contracted on duty.

Many nurses have returned to their homes broken in health, and as the *American Journal of Nursing* states, they are not aware that the Government is more than anxious to care for them. How much their Government cares is now being made known to them by Miss Lucy Minnigerode, Superintendent, Nurse Corps, U.S.P.H.S.

The Public Health Service is prepared to give treatment to the nurses discharged and eligible for such treatment under the Bureau of War Risk Insurance, provided for in the Act of March, 1919. Recently an arrangement has been made with the authorities of Sanatoria whereby a number of nurses may be cared for. A station is at once to be opened where twenty beds will be immediately available for nurses suffering with tuberculosis.

Those nurses needing hospital treatment other than tuberculosis, will be sent to a hospital, where the service has available a number of six-room houses which have recently been prepared for patients. Each one of these units has a bath and sitting room; the nurses who are ambulant and able to do so, will be allowed to go to the club to the general nurses' mess, thus avoiding as far as possible the hospital atmosphere. Nurses from far western states will have provision made for their care in private institutions as near to their homes as possible. Information as to the method of procedure in obtaining this care and treatment should be obtained either from the Red Cross Bureau of Information or from the Division Directors of Nursing in the division from which the applicant was enrolled. Division directors will confer with the medical officers in charge of the District for the Public Health Service, and the Bureau of War Risk Insurance, and arrange with them for the care and treatment of the various applicants. It is possible that later a hospital may be provided, exclusively for nurses, should it be found that there is a sufficient number of applicants for hospital treatment to warrant such a procedure.

#### CLUB FOR V.A.D.'s.

The College of Ambulance is making an appeal for £100,000 to establish a National Memorial College and Club for V.A.D.s. The College of Ambulance has recently taken over fine premises in Queen Anne Street, Cavendish Square, to carry on the training of V.A.D.s in first-aid, nursing, hygiene, and sanitation. A general appeal to doctors, instrument-makers, and chemists, will shortly be issued. Sir James and Lady Cantlie are the prime movers of this appeal.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

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## A WELL-EARNED HONOUR.

Members of the Royal British Nurses' Association have read with great pleasure that Mr. Herbert J. Paterson, F.R.C.S., M.C., Cantab., has received the Order of Commander of the British Empire, and we unite in offering to our esteemed Medical Hon. Secretary our warm congratulations on this well-earned recognition of the splendid work which he accomplished for his country during the years of war. Many of our Members worked, from time to time, in Queen Alexandra's Hospital for Officers, at Highgate, and they, in particular, will feel a great sense of satisfaction that this honour has been conferred upon a surgeon whose work they have so greatly admired, and whose kindness, while they were working in his hospital, they are not likely to forget. Every nursing sister engaged on the staff received £2 2s. a week and emoluments.

## PAGEANT OF THE HISTORY OF NURSING.

The General Council have decided that, for members of the public, the prices of the tickets for the Pageant of the History of Nursing, to be held at the Wharfedale Rooms, Great Central Hotel, W., on April 15th, shall be one guinea, and half a guinea, each, while the nurses' tickets will cost five shillings each, to include refreshments. As the number of the tickets is limited to 500, those who wish to attend should send notice of this to the Secretary at an early date.

The arrangements are now well under consideration, and other interesting functions are anticipated in addition to the Pageant.

## THE NURSES OWN CLUB.

Nurses who wish to become Members or Associates of The Nurses' Own Club should fill in the Coupon on page iv and forward it to H.R.H. the Princess Christian at 78, Pall Mall. The Committee intend that special privileges shall be accorded to the early members.

## LECTURE.

Miss Graham Hope will give a lecture on Wednesday, the 18th inst at 11, Chandos Street, Cavendish Square, W., on "The Social and Moral Influence of Nurses as one of the Greatest Factors in the Welfare of the Human Race." We will announce the hour of the lecture in the next issue of THE BRITISH JOURNAL OF NURSING, and hope that Members of the Royal British Nurses' Association and other nurses will make every effort to attend. The lecture is sure to be most interesting, and as Miss Graham Hope is a very good friend of the nurses, we shall look forward to having a large attendance.

## IDEAL HOMES.

"THE FOUNDATIONS OF THE NATION'S GLORY ARE SET IN THE HOMES OF THE PEOPLE."—*His Majesty the King.*

The question of homes, ideal or otherwise, and how to obtain them, is one that is uppermost in the minds of very many people just now. The opening of the Ideal Homes Exhibition at Olympia on Wednesday last, organised by the *Daily Mail*, by Princess Alice Countess of Athlone, is a valuable contribution to the solution of this problem.

Here and now, we have only space to refer to the Ministry of Health Official Exhibit, which is in the Annexe through the large Central Hall. Here are to be seen blocks of cottages, built from the designs of architects, who competed for the prizes offered by the *Daily Mail*, for plans of cottages for workers, and won the £500 first prize in various industrial areas of the country. The walls of these cottages have been built to scale, to the height of four feet, and their interior decoration finished, so that we get an excellent idea of both ground floor and bedroom floor. Round the walls of the Annexe is a panorama of the elevation of the cottages.

A particularly interesting exhibit in this section is a "lay out," illustrating the Garden City principle applied to the development of towns. Trained nurses who are profoundly conscious of the importance of the housing question in relation to public health and morals, should take an early opportunity of visiting the Exhibition.

## THE MATRON OF THE PRINCE OF WALES HOSPITAL AND HER CHRISTMAS CELEBRATIONS.

We have pleasure in reproducing this week a photograph of Miss Bickerton, R.R.C., Matron of the Prince of Wales General Hospital, Tottenham. She is well known to many members of the R.B.N.A., and is a member of its General Council and Executive Committee.

Miss Bickerton is a very able administrator and one who certainly possesses the gift of keeping the machinery of hospital administration running very smoothly. She and her nurses are obviously the best of good comrades, while it is equally evident that feelings of much admiration and friendship, on the part of the nurses for their Matron, never lead them to forget the respect due to her as their superior officer. In quite another rôle, however, Miss Bickerton excels—that of hostess. Few happier gatherings can be imagined than those at the Hospital during the Christmas season.

Festivities commenced last Christmas morning with gifts to the patients, received by each in the orthodox manner—in their stockings. Later there were services in the wards, and at noon a turkey appeared in each with all the other attributes of a real Christmas dinner. Later the Medical and Nursing staffs had dinner in the nurses' dining hall. In the afternoon there was an entertainment in each ward and the medical and nursing staffs took tea in their own wards later. The day finished with a rehearsal performance by the nurses' entertainment party, preparatory to a performance in the wards next day for the benefit of patients

and their friends. On the 27th the nurses gave an entertainment to the patients' children, and the former had a fancy dress dance in the evening. On Monday, the 29th, the out-patients of the hospital were entertained to a musical tea, when the entertainment was given in the form of choruses, songs and recitations followed by a Christmas Tree. In the evening the domestic staff and porters had their entertainment, to which they were permitted to invite friends. On New Year's Day came the farewell party to nurses then completing their training, and on the following day

the Sisters gave a tea to the whole staff, followed by a fancy dress dance in the nurses' sitting-room.

We cannot close the account of these Christmas festivities without referring to the originality and taste displayed in the decorations and the clever way in which heating apparatus and somewhat incongruous surgical appliances attached here and there to the beds were adorned to bring them into harmony with the scheme of decoration. The children's ward was a veritable fairyland and a curly-headed youngster in the first bed gave us a very spontaneous welcome in his joyous little treble as we entered. At the head of each



MISS BICKERTON, R.R.C.,  
Matron of the Prince of Wales Hospital.

little bed was a dainty water-colour sketch by one of the nurses illustrative of one or other of the old-time fairy tales that are yet ever new with each generation of children.

We congratulate Miss Bickerton on the success of her Christmas celebrations and upon the splendid progress and success which the hospital has made under her able administration.

ISABEL MACDONALD,  
*Secretary to the Corporation.*

10, Orchard Street, London, W.1.

## MISS HUXLEY ENTERTAINS THE IRISH MATRONS' ASSOCIATION.

### REJOICINGS IN DUBLIN.

A successful and very pleasant function was the dinner given by Miss Huxley, the pioneer of Irish Nursing, to the members of the Irish Matrons' Association, on Tuesday, January 27th, to celebrate the passing of the Nurses' Registration Act. A goodly company assembled at the Bonne Bouche Restaurant, Dawson Street, Dublin, and were received by the hostess of the evening.

### THE GUESTS.

Miss Michie, Superintendent Irish Branch Q.V.J.I., President Irish Matrons' Association, Miss Hutchinson, Miss Sampson, Mrs. Manning, Miss Hill, R.R.C., Matron Adelaide Hospital, Miss Carre, Ivanhoe, Miss O'Brien, Miss Carson Rae, Miss Phelan, Miss Keating, Miss Towers, Miss Hezlett, Miss Egan, Miss O'Flynn, Miss Crowther, St. Patrick's Q.V.J.I., Miss Thornton, Miss Reeves, President Irish Nurses' Association, Miss Hughes, Miss Burkitt, Miss Bradburne, Miss Golding, Miss Rhodes, Miss Riordon, Miss Power, Miss Macdonnell, R.R.C., and Miss Patton.

The dining-room was charmingly arranged with oval mahogany tables artistically set out with shining glass and silver and decorated with mimosa and violets, the blue frocks of the waitresses striking an effective note against buff-coloured walls.

The dinner of seven courses made one feel that the past five years were as a dream, and that the Lamp of Aladdin must have been used to conjure back days of plenty and delight when pleasant faces and pretty frocks were an ordinary sight. Miss Huxley occupied the chair, on her right hand Miss Michie, President of the Irish Matrons' Association, on her left Miss Reeves, President of the Irish Nurses' Association.

The health of His Majesty the King having been proposed and duly honoured, Miss Huxley welcomed her guests.

### THE SPEECH OF THE HOSTESS, MISS HUXLEY.

LADIES,—I wish I were a good speaker and that I could make you realise the very great pleasure and satisfaction your presence here to-night gives me, a pleasure which I promised myself at least twenty years ago, probably even longer.

In those early days we little thought of all the difficulties and anxieties we should have to pass through before attaining the fulfilment of our desire.

On this occasion I will not pause to recall all the discouragement we received, when our opponents could not shake our determination to try to procure State Recognition for ourselves. One memorable occasion I call to mind when, after a somewhat stormy meeting, we were described in a London paper next day as the "turbulent few." I leave to your imagination the kind of meeting that one was!

As most of you know, we have spent much time and hard-earned money in order to procure the event we are here to celebrate, and though our success has not come exactly in the way we hoped it would, at least we may congratulate ourselves that our determination in the past was a strong factor in the framing of this broadly-conceived Act.

The Act gives nurses a big representation and share in the framing of rules for their future government, education and status.

The other day, Dr. Addison, Minister of Health for England and Wales, urged nurses to be citizens first and professional women after; that I take as a distinct call to us to help our Minister of Health with all our might, we are to be his help-mates, and in order to stand in that important position we must at once see to our education; that, as a professional body, we are suitably educated to help him in making the nation healthy and strong. I think the Irish Matrons' Association should take the matter in hand at once and plan a scheme for lectures in sanitation, hygiene, preventive medicine, and child welfare, and also lectures giving a working knowledge of the various Acts of Parliament affecting public health; not till then can we hope to be of full use to him.

One of the first essentials in such a scheme is that we should try to work altogether for the common good, not one training school against another, and this I think could most effectively be done by co-operation. A central school, where the best lecturers obtainable could be engaged and the necessary appliances secured to benefit all alike.

To-night our memories recall with both gratitude and regret those who laboured with us, gave of their best to our cause, and have passed away without seeing the result of their labour. Chief among them, the late Mrs. Kildare Tracey and Lord Justice Fitzgibbon.

We also remember many other absent colleagues, such as Misses Kelly, Hampson, Lamont, and Ramsden, who have retired from active service and, unfortunately, live too far away to be with us to-night; they one and all wrote sending their congratulations and saying that they will be with us in spirit and wishing that our future efforts may be as successful as our lengthy struggle has been. We must also remember with gratitude our friends and supporters across the sea, who are almost too numerous to mention by name—both men and women—and from first to last and all the way through the struggle, let us never forget all we owe to our courageous, valiant, and indomitable leader, Mrs. Bedford Fenwick, she who, through all the years has marched straight forward with the one aim and purpose, never heeding friend or foe—and they were many. She has been our inspiration and guide, the pilot who has brought us through rough waters to the port of our desire. All honour to her name. Ladies, I ask you to drink to the health of Mrs. Bedford Fenwick. This was done with right good will.



## MISS O'FLYNN AND THE PIONEERS.

Miss O'Flynn spoke in support, and mentioned the work of Miss Huxley and the Irish Nurses' Association during the past eleven years. What work had been accomplished, in season and out of season, with expenditure of brains and money, and what strenuous toil had at length won its reward. It was now up to the Matrons to see nurses equipped by the best possible training to become professional women.

## MISS REEVES AND PROFESSIONAL RESPONSIBILITY.

Miss Reeves spoke of the Act and its possibilities, and the increased responsibility that the Act would bring. That there should be no more rivalry between various hospitals, but that they should all work more closely together, and in spite of financial stumbling blocks, all should stand and take a part. That small hospitals should be treated as wards of big hospitals; all should share alike in having the best possible material made available for training, and a system should be found under which good lectures should be given which all should attend. The Irish Nurses' Association press for uniform action and for the best obtainable systematic teaching.

## MISS CARRE ON PUBLIC DUTY.

Miss Carre spoke of the prospective benefits to be desired by the nursing profession, and hoped that under the new Act the health and welfare of the nation would be vastly improved.

## MISS CARSON RAE ON PROFESSIONAL ADVANCEMENT.

Miss Carson Rae spoke on the benefits which nurses hoped to obtain from the Act. First, they looked for an improved status—hitherto their

work had been described as a domestic occupation, officially classed with that of the scrubbers and porters of a hospital, but now they were a definite Professional Unit with legal standing and State Recognition. They now hoped for standardisation of training, with improved education, three years' training, State examination, and a one portal to the Register. They further hoped, first, for the affiliation of hospitals whereby small and special hospitals may be enabled to carry on their work without injustice to the nurses; secondly, they hoped for post graduate courses. Miss Huxley had given them a very good résumé of the work done in conjunction

with our friends on the Central Committee, but naturally she had said nothing about her own work. From the beginning of the movement Miss Huxley had worked in it on behalf of Irish nurses, that they might take their place on an equality with their English and Scottish sisters in the Act. Every year she had attended meetings in London, often at great inconvenience, always at her own personal expense.

## THE REWARD OF MISS HUXLEY'S DEVOTION.

Her reward had come now in the passing of the Act, and they owed her a deep debt of gratitude for her work on their behalf. They all wished to thank Miss Huxley very heartily for her kind thought in asking them to

spend such a happy evening, as well as to celebrate this great event in the history of nursing. Miss Carson Rae then proposed the health of Miss Huxley, which was received with enthusiasm, and carried with musical honours. After some time of delightful social intercourse the guests dispersed, with memories of a delightful evening not soon to be forgotten.

Congratulations were received from Mrs. Bedford Fenwick, Miss Breay, Miss Haughton and Miss Strahan.



MISS MARGARET HUXLEY.

Pioneer of the Higher Education of Nurses and State Registration in Ireland. Past President of the Irish Matrons' Association and of the Irish Nurses' Association.

## NEW CLUB FOR NURSES IN DUBLIN.

The College of Nursing Club for Nurses was opened by Lady Powerscourt, at 54, Fitzwilliam Square, Dublin, on the 28th ult.

Sir John Lumsden, Chairman of the Committee, said it was estimated that in order to equip the club, £2,000 was required. Lady Ardilaun had collected £200, Lord Iveagh had given £1,000, and the British Red Cross Society and the Order of St. John, £1,000 (money which in our opinion belongs to sick and wounded soldiers), and the London Board of the College of Nursing had guaranteed the rent of £150 per annum.

The subscription was to be 5s. a year for members of the College, and 10s. 6d. for outside nurses, and 2s. 6d. for probationers.

The Rev. J. M. Hatton said the club was to be run on non-sectarian lines, which would be a sort of assurance to the Catholic nurses.

Miss Rundle, secretary of the College of Nursing, Ltd., was present; and to her and Sir Arthur Stanley, Sir Andrew Horne gave the credit of the passing of the Nurses' Registration Act; but omitted to include the services of Lord Knutsford and Sir Henry Burdett in this connection!—or to allude to the fateful June 27th, 1919, when the obstruction of the College officials to the Bill before Parliament might have succeeded, had not the Minister of Health come forward to save the situation.

Mrs. O'Connor asked what was the idea of penalising nurses who did not see their way to join the English College of Nursing, by asking them to pay an annual subscription of 10s. 6d., while members of the English College were asked to pay only 5s. a year. There was no object in joining that College now that nurses had State Registration.

Sir John Lumsden said, as the College had started the Club, and were paying the rent, the arrangement was not unfair. Mrs. O'Connor repeated her question, when Sir John said he had not expected questions, and must decline to answer them. The company then had tea and enjoyed a musical programme.

## QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

### TRANSFERS AND APPOINTMENTS.

Miss Emily Browning is appointed to Dorsetshire C.N.A. as Assistant Superintendent. Miss Charlotte A. Palmer is appointed to East Sussex C.N.A. as Assistant Superintendent. Miss Cora M. Drake to Exmouth as Senior Nurse. Miss Emily J. Allen to Bury. Miss Adela I. Austin to Ashton-under-Lyne. Miss Helen E. Eardley to Birmingham (Summer Hill Road) East Home. Miss Lucie W. Emery to Stockton and Thornaby. Miss Ethel B. Holmes to Shoreditch. Miss Martha Jennings to Wilmslow. Miss Jean B. Macaulay to Deal. Miss Gertrude H. Stevenson to Harrow. Miss Lucy Taylor to Cambridgeshire C.N.A. as Emergency Nurse. Miss Annie Willetts to Deal.

## DOWN WITH DOLES.

Lord Burnham and the Editor of the *Daily Telegraph* have refused to see any trained Matron or nurse who has called at the office of the *Daily Telegraph*, or to insert their protests against its Shilling Fund for Nurses—projected and thrust upon them by this newspaper without the consent of the Trained Nurses' self-governing organisations, or, indeed, without consulting any other members of the profession with the exception of the Matrons and the one nurse in active practice, who are on the Council of the College of Nursing, Ltd., in support of whose attempted control of the profession the appeal has been launched.

Whether this new charity appeal is part of the old War Charity for Nurses projected by the Actresses' Franchise League (the British Women's Hospital Fund) or not, is not made clear; but if it is associated with it in any way, the *Daily Telegraph* should have first published the Financial Report of the Nation's Fund for Nurses—started in October, 1917—and a copy of which we have been unable to obtain, nor, so far as we can gather, has it been submitted to the press for publication and criticism. We have called for the publication of these accounts on several occasions, as there are various items of expenditure on which both the public, who subscribed through advertisements, and the Nursing Profession have a right to information; and we are quite unable to surmise any valid reason for so long withholding these accounts. The sooner the *Daily Telegraph* devotes a column to their dissection, the better.

Day by day the *D.T.* inserts various opinions and letters in support of its appeal, but so far, as we have stated, not one letter or opinion in opposition to the scheme has been published. Is this fair to the subscribing public? It is not. Further, we state that it purposely misleads the public, and is a scandalous abuse of power.

Day by day the *Daily Telegraph* supports its appeal with *beaucoup de sentiment*. Florence Nightingale, Agnes Jones and other leaders of the past are trotted out. These women would have unhesitatingly condemned "Doles for Nurses" seventy years ago—and we have progressed "some" as the Americans say. We modern women have realised that Charity spells Chains for the workers, and what we intend to have is self-government, self-support and self-respect. It is to these fundamental principles that the College of Nursing Company is instinctively opposed, and which it nips in the bud in its Memorandum, by taking power to remove a nurse from its register and membership *without power of appeal* (Memo. 3(j)).

The methods of the *Daily Telegraph* are very disingenuous. For instance, it informs its readers that on the College Council are "twenty members of the Nursing profession." So there are, but when the Rules were made they were all Matrons—the salaried officials of laymen!—and with two exceptions all these ladies are still under the

control of their hospital committees. Yet the Editor of the *Daily Telegraph* attempts to teach the Minister of Health his duty in connection with the selection of the personnel, of the Governing Body for the Nursing profession under the Nurses' Registration Act, and advises him "to recognise in full measure the position of the College." The College Council claimed in its Bill, in the Lords, last Session, absolute power over Registered Nurses, and as the Government were not anxious for mutiny in Nursing ranks, that outrageous demand found no place in the Government Bill.

#### STORIES OF SACRIFICE.

That the Nurses did their duty nobly during the war—often under most invidious circumstances—dominated by untrained Society Commandants, and plagued to death with untrained and often undisciplined help, no one can deny. But that is no reason for degrading their professional status and economic condition now the time for readjustment and organisation has come.

If there are nurses broken in health it is the duty of the State to classify and care for them—as the American Government has done.

And the organisation of the new Profession of Nursing is the specified duty of the General Nursing Councils set up under the Nurses' Registration Acts—which are to set to work at an early date.

Trained Nurses are quite determined that they will not submit to the interference of the busy-bodies who comprise the "Influential Council" published in the *Daily Telegraph* on January 30th, composed as it is of a motley conglomeration of peeresses, actresses, matrons, titled medicos, and a sprinkling of persons who exploit the nursing profession very successfully by various methods.

#### LOUSY.

The very greatest indignation has been aroused by Mrs. Martin Harvey's contribution in support of "Doles for Nurses" in the same issue. To quote: "Do not forget you who have been gently nurtured, that practically all these cases from the front line were—in addition to all the horror connected with their wounds—lousy."

How dare this actress venture to expose the sanctity of the sick room? How did these glorious men become infected? In *saving England*. As a nurse we affirm that to allude to their condition—one of the worst tortures of the war—and claim filthy lucre for nurses for doing their duty in cleansing our suffering men, is a hideous lapse of taste upon the part of the woman who wrote it, and the paper which published it.

#### PLEASE APOLOGISE!

On February 3rd, Dame Swift, Matron-in-Chief, Joint War Committee, writes in support of Charity, and dares to state that these doles are appreciated "by the profession." As a member of the nursing profession and in the name of thousands of our colleagues, we call upon Dame Swift to withdraw this statement, and apologise for making it.

## THE NURSES' PROTEST IN FLEET STREET.

"Business as usual" was going on in the usual active way; nothing exceptional had occurred to interrupt the even tenor of business life on Wednesday, January 28th. The offices of the great Dailies were preparing for the nightly output. The buzz of many voices was suddenly hushed when a group of Nurses in uniform entered the office of the *Daily Telegraph*, wearing posters back and front inscribed with the words:—

DEGRADATION  
of the  
NURSING PROFESSION  
by  
THE DAILY TELEGRAPH.

TRAINED NURSES  
protest against  
SHILLING DOLES.

"We wish to see the Editor." A young man fled upstairs to bear the message, but soon returned to say that the Editor could not see them—he would not face the music!

Addressing the large and astonished staff, who stood gaping round, the leader of the procession said: "We have come to protest against the action of Lord Burnham for this insult in begging for charity for trained Nurses. The State should shoulder the duty of providing for disabled Nurses." Another: "We have been proud to nurse the sailors and soldiers who have fought for us, and died for us; it is very much against our wishes that they should be asked to contribute to our support." Another: "The body responsible for this appeal is a body of employers of Nurses who make a two-fold appeal to the Public, namely, to endow the College of Nursing Co., and for the maintenance of disabled Nurses, because they desire to build up the Profession on a basis of charity, and hold a monopoly of control over all Nurses. This is quite contrary to the spirit of democracy, and without the consent or wishes of the independent self-respecting Nurses." Leaving their astonished but not unsympathetic audience, the protestors next visited the offices of the *Daily Chronicle*, *The Times* and the *Morning Post*. They were received with courtesy. It was quite evident that they aroused sympathy when the *other side* of the case was put forward clearly and forcibly. We record with pleasure and gratitude that the *Morning Post* published in full the letter signed by the Presidents of the Organised Societies of Nurses setting forth their views upon this important matter. We wish all newspapers had the same sense of fairness.

#### BOBBIES TO THE RESCUE.

A journalist writes:—

"A notice had been received at our office that trained nurses objecting to the *Daily Telegraph* Shilling Fund for Nurses intended to demonstrate

in Fleet Street. from 12 to 2, on January 28th, I was early on the spot to watch proceedings. First I saw upwards of a dozen fine-looking women in uniform, full of life and spirits, shoulder their Posters outside St. Bride's Church, and stream across the road to the office of the *Daily Telegraph*, arousing great and excited interest in that busy thoroughfare. I secured some of the little slips from the Nurses inscribed with just a sentence on each, which the public loudly applauded—

"Large Charity Doles

mean Small Salaries,"

"C stands for College

of Nursing and Charity.

We do not want either."

"Support the Nurses'

Freedom, not the Em-

ployers' Funds." "Cha-

arity Funds destroy

Professional Freedom."

"C stands for Charity

and for Chains. Do

not forge the latter by

the former." "Nurses

have been proud to

serve their country. Do

not degrade them by

Doles."

Indeed, during the

time the deputation

was inside the *Daily*

*Telegraph* office I

entered into conver-

sation with the "mob,"

and found the men

fiercely in favour of the

Nurses' Protest, and

when they reappeared

and stepped over the

road to the office of

the *Daily Chronicle* I

was surprised to note

the road bristling with

Bobbies, who seemed

to have sprung from

nowhere. There they

were laying down the

law—very politely but

very emphatically. The

Nurses had no right

to demonstrate—no

Poster Parades were

allowed in the City—

no leaflets must be

distributed, and so on.

The sympathisers were also warned. I mildly

argued. Leaflets perhaps, no—but Posters—

since when had the freedom of the gutter been

denied to the public? Was it Dora? Was it

the Lord Mayor? From time immemorial Poster

Parades had been permissible. "Never," replied

a young man in blue. "Before you were born,"

I mildly suggested. "Anyway, if you persist"

—"in annoying the *Daily Telegraph*," a nurse

chipped in)—we must run you in." "Tip top,"

another valiant lady exclaimed. "I'll bail you out, Nurse," a City man said, taking off his hat.

"We must yield to force, but this deprivation of freedom must be inquired into," an elderly lady said firmly, and off she tripped on further protest intent. In the meanwhile snap shots of the gay band of Nurses were taken, Posters included, and then, having laid their objections to charity stunts upon their behalf, for the benefit of newspaper booms, and society climbers, before

a sympathetic audience

at the D.C. these

ladies, by no means

chastened, with posters

turned inside out, went

off to lay their views

concerning their own

affairs (which Lord

Burnham and the

Editor of the D.T.

refused to hear) before

the august personnel

in Printing House

Square, and of the

*Morning Post*, with

directions to expose

their Posters once off

the curb.

Good copy, thought

I. But I reckoned

without Social Influence

—in "caps."

With the exception

of the *Morning Post*

none was the word in

Fleet Street.

Not a picture—not a

word appeared.

And, once more—as

so often before—the

great B.P. was bam-

boozled to the top of

its bent.

And that glory of the

British Empire, its

great Free Press, winked

the other eye, whilst

Tommy and Jack,

V.A.D. and Waac, re-

sponded to the senti-

mental appeal of the

D.T. to save the

whole Nursing Pro-

fession from perdition!

As to the "sable and

pearl brigade," what time they could spare be-

tween *déjeuner* at the Carlton, tea at Rump-

mayer's, dinner at the Ritz, and supper at the

Savoy, they purred with satisfaction that their

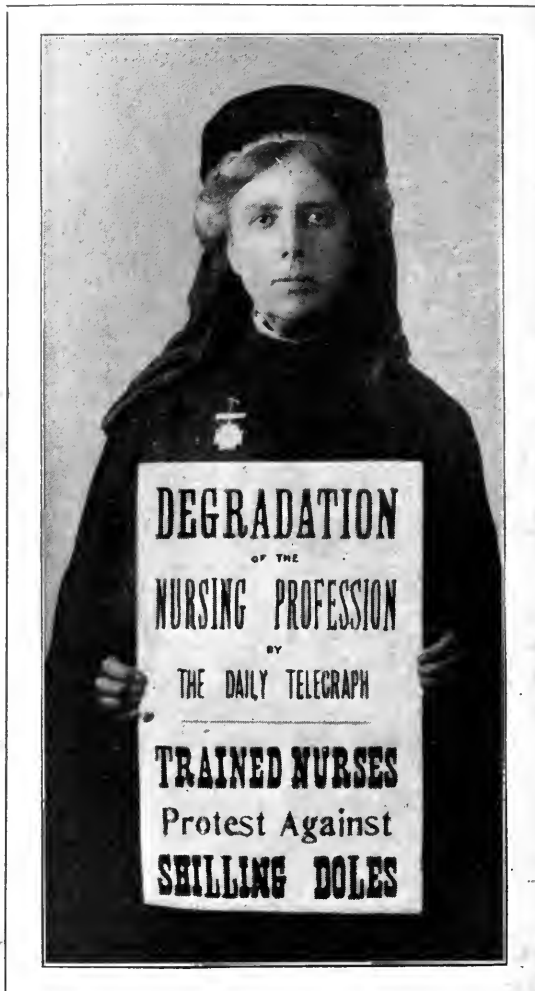
philanthropic labours should receive just recog-

nition from the *hoi polloi*; and the D.T. be enabled

once more to proclaim the throbbing of its great

disinterested Heart with damsels in distress.

"A FREQUENTER OF FLEET STREET."



COUNCILLOR BEATRICE KENT.  
Leader of the Anti-Doles Procession.

## NATIONAL UNION OF TRAINED NURSES.

The Executive Committee of the N.U.T.N. supports the principle of a 48-hour week for nurses. It quite realises the difficulty about private nursing, and in this connection recognises that the Bill is for a 48-hour week, and not an 8-hour day. The Ministry of Labour has been approached by a representative of the N.U.T.N. Committee.

## APPOINTMENTS.

### MATRON.

**Eye Infirmary, Bath.**—Miss C. M. Whitty has been appointed Matron. She was trained in General Nursing at the Royal Infirmary, Bristol, where she also obtained midwifery training. She has held the position of Sister at the Eye Infirmary, Bath, and did Matron's duties there for a year during the absence of the Matron on military service. In 1918 she became Military Sister and afterwards University Sister. She holds a certificate for ophthalmic nursing, and is a certified midwife.

### Maternity Hospital and Child Welfare Centre, Carlisle.

—Miss Gertrude Monk has been appointed Matron. She was trained at the Royal Portsmouth Hospital, and has been Night Sister at the Royal Southern Hospital, Liverpool, and the North Lonsdale Hospital, Barrow-in-Furness, and Sister at Queen Charlotte's Hospital, London.

### Ministry of Pensions Hospital, Knotty Ash, Liverpool.

—Miss Kathleen A. Smith has been appointed Matron of the Ministry of Pensions Hospital, Knotty Ash, Liverpool. She was trained at the Essex and Colchester Hospital, and the Royal Hampshire Hospital, Winchester, and amongst other appointments has held the position of Home Sister in that hospital, Housekeeping Sister at the Royal Infirmary, Leicester, Lady Superintendent at the West Kent Hospital, Maidstone, Matron, Territorial Force Nursing Service, 5th Southern General Hospital, Matron 73rd General Hospital B.E.F., Matron 37th Casualty Clearing Station, British Army of the Rhine. Demobilised December, 1919. Royal Red Cross (1st class), 1916. Mentioned in Dispatches, 1918.

### NIGHT SUPERINTENDENT AND THEATRE SISTER.

**The Infirmary, Isleworth.**—Miss Hilda Soppitt has been appointed Night Superintendent and Theatre Sister. She was trained at Whitechapel Infirmary, E.

Mrs. C. J. Munro and Miss Mary Mugglestone have been appointed Sisters. The former was trained at Selly Oak Infirmary, Birmingham, and the latter at The Infirmary, Isleworth.

### SISTER.

**Infirmary and Dispensary, Bolton.**—Miss Winifred Thorn has been appointed Sister. She was trained at the Essex County Hospital, Colchester, where she subsequently held the position of Ward Sister and Night Sister. She has also held position of Sister at the Hospital, Bury St. Edmunds.

**Royal Infirmary, Blackburn.**—Miss Gladys Thwaite has been appointed Sister. She was trained at the Royal Infirmary, Hull, where she subsequently held the position of Sister and Night Superintendent. She has been Sister at the Victoria Nurses' Home, Hull.

**Stamford and Rutland Infirmary.**—Miss Ethel M. Wilson has been appointed Sister. She was trained at the Firvale Infirmary, Sheffield, and at the South Eastern Fever Hospital, and has since held the position of Sister at the Monsall Fever Hospital, the Norwich Fever Hospital, and the Ladywell Sanatorium, Salford.

## HONOURS FOR NURSES.

At an investiture held on January 27th, in St. Andrew's Hall, Norwich, for His Majesty the King by His Royal Highness Prince Arthur of Connaught, the following ladies were decorated:—

### ROYAL RED CROSS (FIRST CLASS).

Miss Violet Isabel Lamb, Sister Q.A.I.M.N.S. for India; Miss Bessie Hooper Daniels, Sister Q.A.I.M.N.S.R.

### ROYAL RED CROSS (SECOND CLASS).

Miss Louisa May Barker, Matron, Sydney House Hospital, Bitterne, Southampton; Mrs. Mary Elizabeth Harrold, Sister, B.R.C.S.; Miss Elizabeth Rudd, Sister, B.R.C.S.; Miss Ellen Hill, Staff Nurse, Norfolk Mental Hospital, Norwich; Miss Augusta Harvey Bidwell, V.A.D., Thetford.

## ROYAL RED CROSS AWARDS.

### ROYAL RED CROSS (SECOND CLASS).

The King has awarded the Royal Red Cross (Second Class) to the following ladies:—

Miss A. E. Crowsley, Night Sister, No. 1 Red Cross Hosp., Rock House, Lansdown, Bath; Miss E. A. Crummack, Matron, Bridlington V.A.D. Hosp.; Miss S. Dagger, Sister-in-Charge, County Hosp., Huntingdon; Miss E. I. Davies, Sister, Queen Mary's Convalescent Hosp., Dover House, Roehampton; Miss H. Davies, Matron, V.A.D. Hosp., Mere, Wilts; Miss E. F. de Trafford, V.A.D. Asst. Nurse, Aux. Mil. Home Hosp., Moor Park, Preston; Miss E. M. Dowdswell, Sister, Miss Burke's Nursing Home and Co-operative, Highgate; Miss I. S. Ewens, Matron, Richmond Red Cross Hosp.; Miss A. L. Fanshawe, Asst. Commdt., Aux. Hosp., Lewes; Miss C. H. F. Farley, V.A.D. Nurse, V.A.D. Hosp., Sandy, Bedfordshire; Miss L. M. Farthing, Ward Sister, Aux. Hosp., Ampton Hall, Bury St. Edmunds; Miss S. M. France, Sister, Preston and County of Lancaster R. Infirmary; Miss A. A. Gardiner, V.A.D. Nurse, Broadwater Aux. Hosp., Ipswich; Miss J. Gaydon, V.A.D. Staff Nurse, Kingston and Surbiton District Aux. Hosp.; Miss C. Germon, V.A.D. Nurse, Newton Abbot Aux. Hosp., Newton Abbot; Miss M. Goodridge, Sister, Castle V.A. Hosp., Sherborne, Dorset; Miss C. Grundy, Matron, Aux. Hosp., Malvern; Miss L. Hague, V.A.D. Nurse, Kempston Aux. Hosp., Bedford; Miss F. de C. Hamilton, Matron, Carrow Aux. Hosp., Norwich; Miss E. Harrison, Sister, Syon Red Cross Hosp., Brentford; Mrs. D. G. Hickman, Asst. Commdt. and Nurse, Abbey Manor Aux. Hosp., Evesham; Mrs. J. Horncastle, V.A.D., St. John V.A.D. Hosp., Hull; Miss L. Hughes, Sister, Newton House Aux. Hosp., Newbury; Miss M. H. Hughes, V.A.D. Nurse, Red Cross Hosp., Ystrad Ysaf, Denbigh; Mrs. A. Jackson, V.A.D. Nurse, Crediton Aux. Hosp., Crediton; Miss V. M. Jackson, V.A.D. Nurse, St. John's V.A.D. Hosp., Southport; Mrs. H. Jones, Sister, V.A. Hosp., Bishop's Palace Hosp., Peterborough; Mrs. A. Jurgensen, Sister, Home Mead Aux. Hosp., Lymington; Miss A. E. Keats, V.A.D. Asst. Nurse, Colliton Aux. Hosp., Dorchester; Mrs. A. Keer, V.A.D. Nurse, Hart House Hosp., Burnham; Miss H. Kershaw, Sister, Stanswood Aux. Hosp., Fawley, near Southampton; Miss G. King, Sister, Abbotsford, Wymondham, Norfolk; Miss M. J. Laing, V.A.D. Nurse, Bishop's Knoll Section, 2nd Southern Gen. Hosp., Stoke Bishop, Bristol; Miss P. Mapletoft, Matron,

Brook House Aux. Hosp., Levenshulme, Manchester; Miss C. L. Mayo, V.A.D. Asst. Nurse and Staff Nurse, Cornelia Aux. Hosp., Poole, Dorset; Miss H. Montford, Sister (Asst. Matron); Harold Fink Memorial Hosp., Park Lane; Miss E. A. Moody, Matron, Beechgreen Aux. Hosp., Withyham; Miss M. Morrison, Sister, Ingham Old Hall, Stalham, Norfolk; the Hon. V. M. C. Warwick Countess of Onslow, Commdt., Broom House Aux. Hosp., W. Horsley.

Mrs. M. Page, V.A.D., Nurse, Baptist Schools, Chorlton-cum-Hardy, Aux. Hosp., Manchester; Miss R. Paget, Sister, London Hosp.; Mrs. M. Palmer, Matron and Commdt., 1st Durh. V.A.D. Hosp., Whinney House and Saltwell Towers V.A. Hosp., Gateshead, Co. Durham; Miss I. Patton, V.A.D., St. John V.A.D. Hosp., Hull; Mrs. K. Percival, Commdt., V.A.D. Hosp., Towcester; Miss P. Pilkington, V.A.D., Westworth House Aux. Hosp., Wakefield; Miss E. A. Potter, V.A.D. Nurse, The Norlands Aux. Hosp., Erdington; Miss E. Roberts, Matron, Samuelson Hosp., Grosvenor Street, London; Miss J. G. Smith, V.A.D. Nurse Bayley Red Cross Aux. Hosp., Nottingham; Miss J. E. Snodgrass, Matron, Hilden Convalescent Hosp., Galwally, Belfast; Miss K. E. Stanyon, V.A.D. Nurse, Knight Aux. Hosp., Leicester; Miss I. Stevens, Sister, Chipstead V.A.D. Hosp., Sevenoaks; Miss F. A. Stratton, Commdt., V.A.D. Hosp., Brackley; Mrs. K. Sutcliffe, Matron, Fern Hill Hosp., Bacup; Miss A. Telford, Sister, Prince Edward Home, Hunstanton; Mrs. M. Thompson, Matron and Commdt., 14th Durham V.A. Hosp., Morton House, co. Durham; Mrs. E. Thompson-Stoneham, Sister-in-Charge, Brooklands Officers' Hosp., Hull; Miss N. Thomson, Sister, Red Cross Hosp. for Officers, 6, Clarendon Terrace, Brighton; Miss E. J. Tippet, V.A.D. Nurse, Aux. Hosp., Launceston; Miss M. C. Trood, V.A.D. Nurse, Aux. Hosp., Launceston, Cornwall; Miss J. H. Turner, Matron, Cedar Lawn Hosp., Hampstead; Miss V. Upcher, V.A.D. Nurse, Aux. Hosp., Ampton Hall, Bury St. Edmunds; Mrs. M. Vaux, Matron and Commdt., 21st Durham V.A. Hosp., Herrington Hall, Sunderland; Mrs. E. L. Walker, Matron, Relief Hosp., Crown Lane, Streatham; Miss I. Walker, V.A.D., Westworth House Aux. Hosp., Wakefield; Miss E. Warnes, V.A.D. Nurse, Aux. Hosp., Ampton Hall, Bury St. Edmunds; Miss E. Webber, V.A.D. Nurse, Red Cross Hosp. for Officers, Chichester Terrace, Brighton; Mrs. N. Wheeler, Sister, Aux. Mil. Hosp., Southall; Mrs. J. Widdowson, V.A.D. Nurse, Aux. Mil. Hosp., Southwell; Miss C. Wilmott-Smith, Commdt., White Rose Aux. Hosp., Heath, Wakefield; Miss A. S. Wilson, Sister, Red Cross Hosp., Maidenhead.

The awards now notified constitute the final list in respect of the Royal Red Cross decoration for services under the British Red Cross Society or Order of St. John of Jerusalem in England rendered in connection with the war.

### A CIRCULATING LIBRARY OF MEDICAL BOOKS.

Nurses, masseuses, and midwives who desire to have access to medical and scientific books, but who do not wish to purchase them, will be glad to know that Messrs. H. K. Lewis & Co., Ltd., the well-known publishers and booksellers, of 136, Gower Street, W.C. 1, maintain a circulating library of such books, from which, for one guinea per annum, one volume can be had out at

a time, and the prices rise as the number of volumes increases. A new Reading and Writing Room is now open to subscribers at 136, Gower Street, from 9 a.m. to 6.30 p.m. (Saturday 1 p.m.) and should be of considerable use, especially to masseuses who have to consult expensive books of reference. Books can be sent by post, provided the subscriber pays carriage both ways. The library contains 20,000 volumes. New books and editions are added to the library and are available to subscribers immediately on publication.

Messrs. Lewis also stock a large number of books of special interest to nurses, masseuses and midwives.

### SACCHARINE FRAUD CHARGE.

A case of considerable public interest and importance was brought before Mr. D'Eyncourt at Marylebone Police Court on January 27th, by Boots Pure Drug Co., against Militina Fiashetti, trading as the B and A Trading Co., soap and saccharine manufacturers, of 65, Regent's Park Road.

The case as presented by Mr. A. M. Bramall, who prosecuted, on behalf of Messrs. Boots, Ltd., was that the defendants had advertised their saccharine product extensively in widely-read trade journals at prices which Messrs. Boots knew were less than the actual cost of the ingredient saccharine. His clients bought some of the tablets, reputed to be " $\frac{1}{2}$  in 1 (330)" which indicated that there was  $\frac{1}{2}$  a grain of saccharine in each tablet, and that it was 330 times sweeter than sugar. Analysis proved that the tablets contained little more than  $\frac{1}{4}$  of a grain, other samples were bought, and the  $\frac{1}{2}$  grain tablets were found to contain less than  $\frac{1}{4}$  grain of saccharine, while those described as containing  $\frac{1}{4}$  grain contained less than  $\frac{1}{8}$ . The action was brought by Messrs. Boots to safeguard chemists who though selling the goods with a perfectly honest intention, would thereby render themselves liable to prosecution; to safeguard the public who would not receive the amount of saccharine declared, and because honest manufacturers suffered hardships from the underselling.

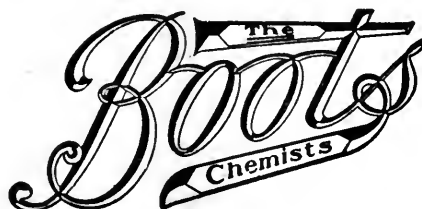
The magistrate said he could not deal with the case in the absence of the defendant, who was stated to be in Italy, as she was liable to imprisonment as well as a fine. After legal argument, the names of Mr. Rasi, general manager of the firm, whom the prosecution endeavoured to show was the responsible party, and Mr. A. Barbetti, son of Madame Fiashetti, were added to the summons, and the case adjourned for a fortnight.

Princess Louise has consented to become honorary president of the National Memorial to Dr. Elsie Inglis.

A Paris doctor has cured a number of cases of encephalitis lethargica (sleeping sickness) following influenza, by means of injections of anti-plague serum.



# A Reliable Dispensing Service.



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555 BRANCHES THROUGHOUT THE COUNTRY.

SIR JESSE BOOT,  
Managing Director.

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## OUTSIDE THE GATES.

Parliament is to be opened in State on February 10th, the Address in reply to the King's Speech will be moved in the House of Lords by the Marquess of Dufferin, who was such a kind friend to the nurses when legislation injurious to their interests was promoted in the Upper House last session.

Lady Astor, M.P. is having a busy time outside Parliament. Speaking at Plymouth last week, she enumerated the good work accomplished by the Coalition Government, and amongst the Acts passed were the Nurses' Registration Act. We hope nurses are not going to forget that this Government has given us suffrage, registration, and various other degrees of emancipation, whilst under Party Government we were bond slaves for generations—one Party as bad as the other.

## MASS MEETING ON THE NEED FOR WOMEN IN PARLIAMENT.

The National Council of Women and the National Union of Societies for Equal Citizenship are arranging a Mass Meeting at Queen's Hall on Thursday, February 12th, at 8 p.m. in support of the need for women as Members of Parliament.

Mr. Lloyd George will speak, public engagements permitting him to do so, also Viscountess Astor, M.P. A further strong list of names is being arranged, particulars of which will be shortly announced.

Tickets ranging from £1 1s. to 1s. are for sale at the office of the National Union of Societies for Equal Citizenship, Evelyn House, 62, Oxford Street, W., and also at the offices of the National Council of Women, Parliament Mansions, Victoria Street, S.W.1.

## COMING EVENTS.

February 7th.—Irish Matrons' Special Meeting To discuss the Training of Nurses. 7.15 p.m.

February 12th.—National Council of Women: Mass Meeting on "The Need for Women in Parliament," Queen's Hall, Langham Place, W. 8 p.m.

February 13th.—Society for State Registration of Nurses: Meeting Executive Committee, 431, Oxford Street, W. 4 p.m.

February 14th.—Professional Union of Trained Nurses. A Mass Meeting will be held at the Scottish Nurses' Club, 205, Bath Street, Glasgow. 2.30 p.m.

February 19th.—Central Midwives Board: Monthly Meeting.

## A WORD FOR THE WEEK.

"We are more than physico-chemical phenomena. There is a higher and deeper life, of which our bodies are the organs; and there are many old persons who demonstrate that Youth is a State of the Soul."

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## KERNELS FROM CORRESPONDENCE.

## DOWN WITH DOLES.

We have been inundated with letters of protest during the past week from all sorts and conditions of nurses on what is now known as the "D.T. Shilling Doles for Nurses." To quote:—

*A London Hospital Matron:* "Oh, the *Daily Telegraph*; it is enough to give all nurses D.T.'s!"

*Half-a-dozen Nurses:* "I have counter-ordered my *Daily Telegraph*." (Most of them notify that they have ordered the *Morning Post* instead. This is a sound policy. Get friends to do likewise.—Ed.)

*Miss A. E. Hulme:* "I take in the *Morning Post*, and I have written to the Editor to thank him for giving us a hearing in his liberal-minded paper. He supports the National Party, which is out for purity in politics and seems able to grasp that nurses have ideals and are ready to fight for them." (The letter of protest, signed by representatives of five of the organised societies of nurses, known as the Party whose slogan is Self-government, Self-support, and Self-respect, as against "College, Charity, and Chains," was boycotted by the entire daily Press excepting the *Morning Post*. This shows how the public are misled by the 'free Press' in this land of liberty.—Ed.)

*Woman Journalist:* "I am about fed up with this business. My article on 'The Economic Position of Nurses,' turned down by one paper after another. One truthful ruffian told me baldly, 'Dog don't eat dog. The D.T. has got a good scoop. It isn't etiquette in Fleet Street to down it. Our turn next. Wish someone would run a shilling dole for me. I feel like a visit to the Carlton instead of the A.B.C., don't you? Well we shall never get there on the reform ticket. You run away and find out which of the widowed duchesses is going to buy herself a soldier boy or if it is true the Americans won't play the game till "Prinnie" fixes it up with "Poppa." That's the stuff to sell our paper, and that's what newspapers are for.'"

## "LOUSY" SOLDIERS.

*Sister Q.A.I.M.N.S.:* "What is the use of advising us to appeal to the Army Council? All our complaints must filter through the Nursing Board, and as the Matrons are all 'College' and presumably approve of this nauseating appeal in the *Daily Telegraph*, begging from our patients, who is going to bell the cat? To be quite frank, no one in this hospital is taking any risks. Apparently we shall grumble, but just allow an actress to describe our heroic sick and wounded, many of whom died for us, as 'lousy' in a public newspaper, without a protest."

("Every military Sister and Nurse who resents this Shilling Dole Fund and its methods of publicity, owes it to herself and to her profession to express the objection to the Nursing Board, of which the Director-General, Royal Army Medical Corps, is chairman. We cannot believe under existing circumstances that they would be penalised for so doing.—ED.)

*Territorial Sister:* "Lousy, indeed! Can't you just hear Tommy's *tu quoque*, to Mrs. Martin Harvey's description of his condition when in hospital, after suffering heroically in the trenches?" (We can; but we refrain from publishing it.—ED.)

*R.B.N.A. Nurse:* "I have asked Mrs. Martin Harvey by what right she violates the sanctity of our soldiers' sick-room by alluding to them in the *Daily Telegraph* as in a 'lousy' condition in hospital. It is scandalous. These outsiders have no sense of professional fitness."

#### STARVING OFFICERS.

*Mrs. Morison:* "I note Earl Haig said at the Mansion House on Saturday that our demobilised officers and their families were actually starving. Are these the men to whom the War Office has permitted that enterprising news-sheet, the *Daily Telegraph*, to appeal for subscriptions for trained nurses? My niece was in the Reserve during the war, and, like thousands of other Sisters and Nurses, needs no charity doles. She is earning a sufficiency, as can other nurses, if they will only do the work in districts, infirmaries, and elsewhere, which requires doing. I note that the *Daily Telegraph* announces that 'collecting sheets have been sent out not only to all regiments in the United Kingdom, but to all ships in commission.' Does this mean senior officers can command their subordinates to subscribe? If so, it ought not to have been permitted by the War Office and the Admiralty. Social influence at work once again. Anyway, military nurses and sisters should protest publicly against this depreciation of their rank."

*Out-Patient Sister:* "As Matron is ardently 'College,' and thinks we ought to be very grateful 'to kind and powerful people,' for getting money for us, I offered to take a collecting box round the Out-patient Department of this hospital for the 'College Shilling Fund.' To this she objected most strongly and gave me a good wiggling for 'making such an impertinent suggestion!' Why? I can't see the difference of begging from civil hospital patients and of begging for nurses from soldiers, sailors, Waacs, quacks, V.A.D.s, and every sort of varlet, through a newspaper fund. Of course you will realise the above statement is quite imaginary, but it is not unreasonable. If I made the offer the whole hospital would be up in arms; and quite rightly."

#### THE POOR MATRONS.

*Matron of a Small Hospital:* "Sometimes, I think the poor Matrons need commiseration. We have not always a bed of roses. Committees

think of nothing but "expenses," and listen to every silly complaint, even from the newest pro. We are now threatened to be reported to the College of Nursing, if directions are objected to. Between the devil and the deep sea, indeed!"

#### BUSINESS HONOUR.

*Superintendent Private Nursing Institute:* "I was pleased to note you promised to deal with private nursing affairs. They need it. I find very few trained nurses have any sense of business honour. They think nothing of joining a staff, getting introductions to doctors, and then resigning and taking cases on their own, from these same doctors, and so injuring a hardly built up business. Is there any redress for this sort of thing?" (We should be greatly obliged to superintendents of such institutions, if they will reply to the above complaint. We know it has justification.—ED.)

#### SCOTTISH NURSES PREFER UNION.

*Scottish Nurse.*—"We are very sad over our Nursing Act. We are entirely under the Board of Health, not a very understanding body, in my opinion. We ought to have had a United Kingdom Act, and been part of a large and influential Council, instead of having a little local Council to govern us, which will certainly require a State subsidy if it is to carry on."

[We fear Scottish nurses must blame their own compatriots for the splitting up of the United Kingdoms Bill. The Central Committee's Bill provided for union, but Scottish members of the College Council spent days in the Lobby in the House of Commons in obstructing its passage into law. We hope, however, that means will be found through reciprocity to minimise any injury to Scottish nurses.—ED.]

#### NOTICE.

The Editor regrets that she cannot find space for long letters, and hopes her correspondents, whose communications she greatly values, will not exceed 300 words.

#### OUR PRIZE COMPETITIONS.

##### QUESTIONS.

*February 7th.*—What should a Nurse know about Venereal Diseases?

*February 14th.*—What conclusions might be drawn from a patient's posture in bed?

*February 21st.*—Frequent micturition in children. Describe causes and treatment.

#### HOW TO HELP THE B. J. N.

1. Subscribe for it.
2. Send news to it.
3. Patronise our advertisers.

# The Midwife.

## QUEEN CHARLOTTE'S HOSPITAL.

### ROYAL HELP.

The Queen has sent a subscription of £5 to Queen Charlotte's Hospital and Queen Alexandra has sent a similar amount.

### APPOINTMENT OF SISTER-MIDWIFE.

Miss Ethel Smithies has been appointed Sister-Midwife. She was trained at the Chorlton Union Hospitals, Manchester, and has been Ward Sister, District Sister, and Night Sister at St. Mary's Hospitals, Manchester.

## THE LAST MEDICAL REPORT OF THE LOCAL GOVERNMENT BOARD.

The Supplement to the last, and forty-eighth, Annual Report of the Local Government Board contains the Report of the Medical Department for 1918-1919. Reference is made to the grave fact that there was for the first time since the establishment of civil registration an excess of deaths over births in the last quarter of 1918 of 79,443, thus causing a decrease in the population to that extent, in spite of the fact that there was no infant mortality in that year as a result of war conditions and the influenza epidemic.

As may be readily imagined, ante-natal treatment suffered from the scarcity of medical practitioners during the war, but it is claimed that an immense saving of life resulted from the action of the Food Controller and the Local Government Board conjointly in providing during 1918 for the supply of fresh and dried milk, and of extra meat and butter for expectant mothers. Provision of milk and of sugar for artificially-fed babies, attending at infant welfare centres was also made.

The provision of midwives both in urban and rural districts was, it is stated, aided by grants from the Board, and the Midwives Act of 1918 has enabled the local authorities both to provide midwives and to assist in their training. Of the certificated women on the Midwives' Roll one-fifth only are in actual practice as midwives; but 845 candidates out of 1,548 successful at the last examination declared their intention to practise as midwives—including 471 proposing to settle in rural districts. The Board has also authorised grants for "home helps" in working-class households at the time of confinements, and this will no doubt help to eliminate the insufficiently trained nurse. Emphasis is laid upon the necessity for the provision of maternity beds in homes and hospitals for the very large numbers of women, married and single, who cannot find suitable accommodation in their homes or lodgings. This urgent necessity "is one the need for which has been very slowly comprehended both by the

local authorities and voluntary associations." In certain conditions the utilization of a ward—named the "district maternity home"—in union infirmaries has been authorised. A substantial development of dental facilities for expectant and nursing mothers and also for children under school age is noted.

### A WISE DEMAND.

We commend the Women's Co-operative Guild on having issued a circular demanding the control of maternity centres by the local authority rather than by voluntary organisations, and adequate representation of working women on committees controlling them. They also urge an increase in the number of maternity and infant welfare centres, the provision of a sufficient quantity of milk to all mothers, and of more maternity homes; the immediate establishment of maternity committees, a service of home helps, a national midwifery service, and a free service of medical specialists.

### CLOTTING OF MILK IN THE STOMACH.

The *Journal of the American Medical Association* describes the result of an investigation recently conducted at the Jefferson Medical College. A subject was found who could regurgitate the stomach contents at will. It was discovered by observation that milk drunk rapidly left the stomach sooner and produced a smaller curd mass, than milk drunk slowly or sipped. Raw whole cow's milk formed a large, hard curd; boiled milk curdled in a much finer and softer form. The presence of much cream in the milk ensured the formation of particularly soft curds which were slow to leave the stomach. Skim milk yielded a very hard curd, owing to the absence of fat. Pasteurized milk yielded smaller curds than the raw whole milk; cold milk coagulated more slowly than warm milk.

### A PRAYER TO OUR LADY.

Look kindly where poor people are,  
Mary of Homes, keep trouble far.

Shelter beneath thy prayers' wings,  
Mary of Roses, all young things.

Keep children warm thro' winds and rains  
Of cold nights, Mary of Counterpanes.

Send us high skies, blue days and fair,  
Mary of Swallows, bless the air.

Paint lovers' days a rose red hue,  
Mary of Peacocks, green and blue

All wandering men, abroad at night,  
Mary of Candles, give them light.

Pray for me as I ring thy chimes,  
In my poor belfry, Mary of Rhymes.

—From *Skylark and Swallow*, by R. L. GALES.

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
**THE NURSING RECORD**  
EDITED BY MRS BEDFORD FENWICK

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## EDITORIAL.

### IDEAL HOMES.

We are a home-loving people, and the pity is that this national characteristic is so often discouraged and suppressed by the initial difficulty of finding houses which can be transformed into ideal homes. It requires much determination in the face of adverse circumstances to convert unpromising material into convenient and attractive homes.

We are, therefore, indebted to the *Daily Mail*, which is demonstrating at the Ideal Home Exhibition at Olympia, how convenient houses can be quickly erected to meet the present shortage, and purchased at moderate cost, and how they can be fitted with labour-saving appliances so that the difficulty of service is reduced to a minimum.

But it is not only in houses where servants are employed that labour-saving appliances are needed. We are apt to blame dwellers in the slums for their shiftless, slatternly, and sometimes drinking habits. A man and woman hopeful of a happy future may start married life with the aspiration to "get a little home together," but, owing to exorbitant rents, and the difficulty of finding anywhere to live—a difficulty by no means confined to towns—they may have to begin life in two rooms. All water must be carried from the basement, and boiled on a fire in an open grate; cooking and washing must be done in the living room, and many a trim and capable maid, as a working man's wife loses heart, and succumbs to circumstances. In an ideal home she might have been an ideal wife; in a slum she too often ceases to struggle against the sordidness, inconvenience, and dirt of her environment. Her husband, after his day's work, finding his home uncared for, his wife unkempt, and his children querulous, often gravitates to the public-house for

company and brightness. Although many a man and woman, all honour to them, rise superior to their surroundings, it is a national disgrace that they should be compelled to live in insanitary and unsuitable houses.

The Ministry of Health has shown that it appreciates the fundamental importance of the housing question by its official exhibits of town planning, and ideal cottages for both urban and rural districts, at the Exhibition at Olympia, and because the ideal home has a garden, the Ministry of Agriculture also demonstrates what can be done in this direction in relation to modern allotments.

Moreover, in an ideal home there are children, and therefore there is an exhibition of nurseries carried out from the designs of the Queens of Holland, Spain, and the Belgians, the Crown Princess of Sweden, Princess Alice (Countess of Athlone), and our own Princess Mary. The diverse national characteristics of each are very interesting. But these are sumptuous nurseries for the well-to-do, and in our opinion are, for the most part, overcrowded with furniture. The simplest, and the one which appealed to us most, is that designed by Princess Mary. There is also on view an Infant Welfare Clinic, arranged by Middlesex Hospital in conjunction with the St. Marylebone Health Society.

As for labour-saving appliances, the crowd that surges through the section of the Exhibition where these are demonstrated makes it obvious that there is a great demand for these on the part of the public. "Be it ever so humble, there's no place like home." It is the place to which the thoughts of many whom duty calls to service in far distant parts of the Empire turn with affection and longing, and it is the ambition of every home-maker to secure appliances which will add to its efficiency and attraction.

The Exhibition at Olympia remains open until February 24th, and is well worth a visit.

## OUR PRIZE COMPETITION.

### WHAT SHOULD A NURSE KNOW ABOUT VENEREAL DISEASES?

We have pleasure in awarding the prize this week to Miss Alice M. Burns, East Suffolk and Ipswich Hospital, Ipswich.

#### PRIZE PAPER.

We think that a nurse should know enough about venereal diseases to arouse her warm sympathy with the sufferers, to nurse them intelligently, to prevent the spread of infection, and lastly, to recognise symptoms among those who have not as yet sought advice, and are probably ignorant of their condition, and advise a visit to the doctor.

Now, with regard to the first requirement, we cannot realise too early that we are here to help and not to judge, and that our assumption of that office does nothing better than repel and harden the sufferers, and discourage them from seeking further treatment. Besides, your victim may be suffering because of someone else's wrong-doing, and further, your established case of venereal disease has probably transgressed the moral law no further than the acquaintance whom you regard as respectable, but who has, so far, escaped the consequences of his wrong-doing—a humiliating thought this, but unanswerable. It is impossible for you to judge in these matters; therefore your only rational attitude is a charitable one.

Now, to nurse venereal disease intelligently we must understand something of the nature of the organisms which precede it.

There are two kinds of venereal disease—Syphilis and Gonorrhœa—with an occasional third—Soft Chancre. The two first are known to date back to early Bible times. There is a record of gonorrhœa in Leviticus (Chap. xv.), and again in the Second Book of Samuel, whilst records of syphilis date back to about the same period. Syphilis was first brought to England by the sailors of Christopher Columbus in 1495, after their voyage to the West Indies, and it has been rampant in this country ever since.

In 1905 the bacillus of Syphilis was isolated by Hoffman and Schaudinn, and named the *Spirochæta Pallida*. This bacillus cannot invade the body through the unbroken skin, but abrasions and cracks, too small for the naked eye, are sufficient as channels for infection. The incubation period is from 15 to 20 days or more. Primary sores appear from the seventeenth to the thirty-fifth days. All primary lesions may disappear without treatment. After this there is a second incubation period of forty days, following which the symptoms of secondary syphilis appear. There will be a slight rise of

temperature; the patient feels ill; all the symptoms of the primary stage may be duplicated in the second, together with many others, among which are loss of hair, rashes of any size, shape and location, mucous patches in mouth, orchitis, iritis and keratitis. Secondary syphilis lasts from two to four years, according to treatment. Symptoms of the third stage, called tertiary, may come on at any period up to thirty years. The lesions of this stage are always destructive, and may attack any part or organ of the body. They are seen in the skin as ulcers, and are, perhaps, commonest on the legs of old people. This kind of ulcer has a well-defined edge. Cases of tertiary syphilis are frequently to be met with in the wards of our general hospitals, diagnosed under their localisations, as at this stage they are not specially infective.

Sufferers in the early stages who marry are almost certain to transmit the disease to their offspring. Syphilis may be inherited from one or both parents, and the child may be either palpably a physical wreck at birth, or may appear normal and show the signs of congenital syphilis after about six weeks. It will begin to waste away, develop a rash on the buttocks, and snuffles, a sign that the bones of the nose have been attacked, or it may become blind from destructive ulceration of the cornea; in short, a burden to itself, and, if it manages to grow up, to the State. It is very largely the victims of congenital syphilis who fill our crippled children's hospitals, our workhouses and asylums. Again, a syphilitic pregnancy is very liable to end in abortion or still-birth.

Gonorrhœa is a local infection only of the mucous membrane of the genital organs, and its treatment is local. Its most important aspect to the nation is that it produces sterility in both sexes (a) by stricture of the *ductus deferens* in the male, and (b) by closing the Fallopian tubes by inflammatory thickening in the female.

The discharges of both syphilis and gonorrhœa are infective, and everything which the sufferers use must be disinfected, as every nurse should know. Modern treatment of syphilis is by salvarsan or its equivalents, details of which cannot be given in the space of this article. It is important to know, however, that the *Spirochætes* may show virility even after a test has given a negative result. Thus supervision should extend over a period of at least two years.

#### HONOURABLE MENTION.

The following competitors receive honorable mention:—Miss Winifred Appleton, Miss E. K. Dickson, Miss F. James, Miss D. Fenton.



## NURSING ECHOES.

The Prince of Wales, who has become President of Guy's Hospital, had a very warm welcome when he paid a visit to the hospital last week, to attend a Court of Governors in the Board Room, at which a special committee was appointed to issue an appeal for funds.

His Royal Highness afterwards visited the hospital chapel and some of the wards, accompanied by Mr. Cosmo Bonsor, Mr. F. P. Whitbread (Acting Treasurer), the Hon. Sir Sidney Greville, Mr. H. L. Eason, who was recently

clined the honour, preferring to meet her real friends by and bye at an afternoon function in a more homely way. Recently two little dinners—very happy reunions—have taken place, one given by representatives of the Nurses' organisations, of which Mrs. Fenwick and Miss Breay are members, and to which they were both invited, at which Miss Heather-Bigg presided; and a second last Saturday evening, by old "Bart's" colleagues, with Mrs. Andrews in the very informal chair. Amongst those present were four old pupils—Miss Beatrice Cutler, Miss M. Breay, Mrs. Turnbull and Mrs.



**HIS ROYAL HIGHNESS, THE PRINCE OF WALES, PRESIDENT OF GUY'S HOSPITAL, OFFICIALS AND NURSING STAFF.**

Senior Ophthalmic Surgeon, and has now taken over the post of Superintendent, and Miss Margaret Hogg, the Matron. In the wards the Prince chatted with the patients, displaying particular interest in those who were ex-service men.

His Royal Highness was photographed surrounded by the officers and nurses, and you can see from this reproduction how charming he looked.

Mrs. Bedford Fenwick has been offered a Banquet by her many nurse friends to celebrate the passing of the Nursing Acts, but whilst deeply appreciating their kindness, she has de-

Andrews—together with Mrs. Shuter, Miss Villiers, Miss Le Geyt and Miss Hale, all of whom have taken a long and loyal interest in the Central Committee's Bill, so many of the plums from which have happily been kneaded into the Government's Nursing Acts.

The Minister of Health has approved generally the scheme of the Southwark Guardians, regarding the proposed erection of an additional wing to the Nurses' Home at their Infirmary, suggesting that at least 30 per cent. of the bedrooms should have fireplaces fixed so as to afford an alternative method of heating.

We hear that great interest has been aroused amongst Glasgow nurses concerning the meeting convened at the Scottish Nurses' Club, 205, Bath Street, on Feb. 14th at 2.30, when the aims and objects of the Professional Union of Trained Nurses will be discussed. We do hope Matrons and Nurses who have not studied trade unionism in relation to Nursing will attend and hear what the speakers have to say. It is a great temptation to refuse to listen to opinions to which one has a preconceived objection. But in these rapid times that is, after all, the policy of the ostrich, and it is not considered a bird notorious for its perspicacity! Dr. MacGregor Robertson is to be in the chair.

"You-all gotta wait fo' yoah supper 'til I ster'lise de ice pick," said a coloured cook to her mistress. "I done drop'd it on de flo' and de hygiene teachah tol' me to be careful er germs."

This was heard in a small town in Georgia, says the *Pacific Coast Journal of Nursing*, where a course in Home Hygiene was being offered to the coloured women by the Red Cross Public Health Nurse. The instructor pictured to them vividly the spread of bacteria, and told them that germs could be carried to food by dirty handling, and by contamination of soiled dish-towels, unsanitary refrigerators, and so forth.

After the first lesson women reported that their cooks came home, scrubbed the refrigerator, cleaned the stove, and burned up all the dish-towels.

We seem to hear nothing through our newspapers of the sorry condition of Poland and Serbia. The American Red Cross appears to be still struggling with the sad conditions prevailing. In Kalisz, Poland, alone from January to July, 1919, there were 124,000 typhus cases. The American Red Cross has an appropriation of 2,000,000 dollars, and over one hundred persons at work. In Serbia, one hundred beds in their Chachak Hospital is the sole weapon in possession of the Serbian Relief Committee for use in reaching thousands of sick children in Central Serbia. It is reputed that thirty per cent. of the Serbs have tuberculosis and trachoma, and bad teeth are prevalent. Also, typhus stalks abroad once more, while small-pox, malaria, influenza, cholera and pneumonia haunt the villages, and feed upon the starving women and children. Most of the children are orphans, and many are entirely naked. Hundreds were ferreted out of the half-burned ruins, where they had concealed themselves, curled

up, quietly dying. What is our Red Cross doing? It has still thousands of pounds unspent, or surely it could not be subsidising the Midwives Institute, Nurses' Clubs, and educating V.A.D.'s.

We were talking to a really kind woman the other day of these terrible conditions, when she astonished us by saying: "I am weary of war and all its horrors. I don't seem to be able to feel these things any more, and you know I never pretend. Talk of something else."

## INTERNATIONAL NEWS.

Broad-minded nurses with international sympathies are beginning to ask "When and where are we to have the next International Nursing Congress?" That point has not yet been settled, but the good comradeship which resulted before the war, between the nurses of all nations, from these gatherings is acknowledged by all, in spite of everything which has happened since. The Cologne Meeting still remains a memory, at which the representatives of twenty-three countries came together in amity and learned many things for the benefit of humanity from one another. The German men and women who took part in that Congress were all out against tyranny and ignorance where nursing and suffering were concerned, just as we have been for the past thirty years.

Miss L. L. Dock writes that at the great gathering of American nurses at Atlanta, April 12th to 17th, international matters are to receive consideration. Alas! owing to the immense expense it is very improbable that any officer of our National Council will be present; but we should meet at an early date and send our suggestions. The Norwegian and Italian nurses are applying for affiliation with the International Council, and a meeting in Italy in the near future would be very acceptable to many of us. Queen Elena's School of Nursing at Rome, organised on Florence Nightingale lines, takes precedence of all others, and the fine work of Miss Dorothy Snell, as its Superintendent, deserves to be better known throughout the Nursing world than it is.

We hear a Dutch Sister from the Rotterdam Nosokomos is going to Atlanta. We congratulate Nosokomos. The Dutch are still striving for legal status, through State Registration, and now that time can again be devoted to domestic politics, we hope their Government will follow the example of ours, and do justice to its nurses, who are a very fine body of women.

## CENTRAL COMMITTEE FOR THE STATE REGISTRATION OF NURSES.

A statement has been circulated by the *Nursing Times* "that the Central Committee is considering the question of disbanding."

This statement is entirely erroneous.

The Central Committee, which is the first organisation of Nurses mentioned in the Schedule of the Act for the State Registration of Nurses, will, in the future, as it has in the past, continue to focus Nursing and Medical opinion for the benefit of the Nursing Profession and the community, so long as it considers it advisable to do so.

## CONGRATULATIONS FROM CANADA.

The following letter has been received from Miss Helen Randal, the Editor of the *Canadian Nurse*, which is the official organ of the National Association of Trained Nurses of Canada, from the Atlantic to the Pacific. As our Act provides for reciprocity with our Canadian colleagues, under prescribed rules, our General Nursing Council will, in due course, be in communication with Nursing Authorities in that Dominion. Canadian nurses gave ample proof of their skill and devotion during the great war, and it will be gratifying to come into closer professional touch with them through the Act, upon the passing of which congratulations are conveyed to us:—

302, FIFTEENTH AVENUE,  
EAST BURNABY, B.C.

MY DEAR MRS. BEDFORD FENWICK,—Congratulations from *The Canadian Nurse* magazine on the passing of the Registration Bill after so many years waiting for it. We in British Columbia thought six years was a long time to get our legislation through, but you were much longer. Of course, like all Acts, there are compromises, and never a law that is perfect, but the establishment of central control means so much.

After so many years of the hardest work may I offer to you personally our congratulations that you have been permitted to see the fruit of your work and energy.

Very sincerely yours,  
HELEN RANDAL,  
Editor, *The Canadian Nurse*.

## LONG OVERDUE.

We believe that the report of the Nation's Fund for Nurses (registered under the War Charities Act), which should have been ready in November, 1918, may be expected in about a month's time. We hope so, as it is long overdue, and there is no legitimate reason for delay.

## ANNUAL MEETING OF THE NURSES' CO-OPERATION.

The above meeting was held at 35, Langham Street on Friday, the 6th inst., at 5.30 p.m. It is many years since such a large number of nurses was roused to be present at a meeting of the Nurses' Co-operation, but, partly owing to the fact that a whip in the shape of a postcard was sent round by the Lady Superintendent to those members of the nursing staff who were considered sufficiently docile and unthinking, and that even the help and applause of the office clerks (who were not nurses) were not disdained, there was a very full meeting.

Mr. Harold Low, M.R.C.S., the chairman, presided, supported by Drs. Turney and Giles, and—wonder of wonders—Sir Henry Burdett, who has not attended a public meeting of the Nurses' Co-operation for twenty years, defied his doctors (so it was said) and came. The "agitators" were also well represented, and after the chairman had gone through the business of the meeting, and amongst other things, made the announcement that two nurses' representatives who had faithfully served the nurses (one for sixteen consecutive years, and one a little under that time) had been supplanted, Miss Maude MacCallum, one of the nurses' representatives, and also the Hon. Secretary of the Professional Union of Trained Nurses, rose, and announced that owing to the fact that a case was pending in the law-court, the minority did not intend for the moment to contest this election, she proceeded to remind the chairman that she had protested to him at a committee meeting against the trickery that was being used to deceive the nurses, and to influence their votes, and that she had put into his hands, a letter, purporting to come from nurses of the Co-operation who were, presumably, so busy being loyal that they had forgotten to put their names to the circulars they were sending out; also one signed by Mrs. Crowe, the Co-operation Secretary, which practically told the nurses that if they did not say "yes" to the question: "Are you satisfied with the present constitution?" the Co-operation would be broken up and their means of livelihood taken from them.

The honours of war, however, remained to the "agitators," as the chairman announced quite as an afterthought, that one of the two things they were asking for was to be conceded. Their demand is first, to be allowed to become members of the Nurses' Co-operation, secondly to have representation on the Home Committee of the Howard de Walden Club.

Some little time ago seven of the ten Nurses' representatives wrote a letter asking Mr. Henry Bentinck, the Howard de Walden Trustee, to receive them as a deputation on this subject. The request was acceded to, a special meeting was called, and all the nurses' representatives present (with the exception of Miss Geraldine Bremner, member of the Council of the College of Nursing,

Ltd., who expressed herself as quite satisfied with the present arrangement) pressed Mr. Bentinck to alter the agreement between Lady Howard de Walden and the Nurses' Co-operation, which excluded nurses from the Home Committee, Miss Hilliard pointing out that it was only an act of common justice, and Miss MacCallum that large sums of money both out of the nurses' private purses, and of the Co-operation funds, went to pay the debts of the Howard de Walden Club, which has never paid its way. It was very gratifying to the minority to hear that Mr. H. Bentinck had decided to alter the agreement, and thus it would be possible for the members of the Nursing Staff to sit on the committee.

Who knows but that the "agitators" may not in the near future achieve their second object? In the meantime it will be interesting to know who will be the first representatives on the Home Committee, those who agitated and *got* the representation, or those who were "loyal" and satisfied. It is a little early for the cuckoo.

### IRISH MATRONS' ASSOCIATION.

A special meeting of the I.M.A. was held at 34, St. Stephen's Green, on 7th inst., Miss Michie, President, in the chair. The question of the appointment of a Tutor Sister in hospitals was discussed, and it was unanimously agreed to circularise the Boards of Governors of the local hospitals, with a view to the appointment of a specially qualified teaching Sister for each hospital.

### THE IRISH NURSES' ASSOCIATION.

The monthly meeting of the I.N.A. was held on February 7th, at the Association's Rooms, 34, St. Stephen's Green, Dublin, Miss Reeves, R.R.C., President in the chair. There was a good attendance. It was decided to have the annual business meeting on March 6th, and the annual social re-union on March 17th, St. Patrick's Day.

### CORK NURSES' HOSTEL.

The Cork Nurses' Association are very anxious to establish a Nurses' Hostel in the City, and on Friday last held a very successful Masked Fancy Dress Ball, in support of it. Several prizes were awarded.

### WAR SERVICES.

#### LIST OF MENTIONS.

The names of a number of trained nurses in the Dominion of Canada and the Dominion of New Zealand are to be added to those brought to the notice of the Secretary of State for War for valuable nursing services in connection with the War.

The names of some hundreds of V.A.D.s have been mentioned to the Secretary of State for War, by Sir Arthur Stanley, Chairman of the Joint War Committee, for valuable services in connection with the establishment, organization, and maintenance of hospitals for the Military Forces.

### ROYAL RED CROSS.

The King has given orders for the following appointments, on the recommendation of the Government of India, for valuable services rendered in connexion with Military Operations in Persia, (Bushire Force) (dated June 3rd, 1919):—

#### ROYAL RED CROSS, SECOND CLASS.

Miss L. Stewart, Staff Nurse, Aust. A.N.S.; Miss E. L. Wellard, Sister, Aust. A.N.S.; Miss M. B. Waterstrom, Sister, Aust. A.N.S.

For valuable and distinguished services rendered in connexion with the operations at Murmansk during the period March 1 to October 12th, 1919. Dated November 11th, 1919:—

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Brown, Matron Miss S.; McCann, Sister Miss H.; Pullen, Sister Miss G.J.

### SCOTTISH NURSING NOTES.

The new Nurses' Club in Edinburgh is in the hands of the decorators, and is to be opened on February 17th. Considerable indignation and surprise has been caused by the announcement that the subscription for "College" members is to be 7s. 6d., and for nurses who are not members of the College, 10s. 6d. The drawing-room of the Club will be reserved solely for College members. We should imagine the "goats" will find pasture elsewhere. Unless subscribers who have founded the Club gave their money on this understanding, it is, of course, not fair.

The Scottish Nurses' Club in Glasgow, although initiated and founded by the Scottish Nurses' Association, was thrown open on equal terms to all nurses holding certificates of training. Probationers in training are admitted on special terms as associates.

So that the net result of the constitution of the Edinburgh Club is that Glasgow throws its Club open to College members on equal terms, whilst Edinburgh discriminates against trained nurses who are not members of the College. This is the type of pressure brought to bear upon members of the Nursing Profession in Scotland, to which those who claim freedom of conscience naturally take exception.

The "Nurses' Own Club," which is being promoted by the Royal British Nurses' Association in London, will be open to all nurses of certain professional standing without interference as to which Nurses' Organisation they belong.

Miss A. W. Gill, R.R.C., Matron of the Royal Infirmary, Edinburgh, has been appointed a member of the Council of the Medical and Allied Services, in connection with the Scottish Board of Health. We congratulate the Board in providing for nursing opinion on this advisory Council, as it will be called upon to deal with nursing as an allied service in connection with the national health.

## DOWN WITH DOLES.

The *Daily Telegraph*, through its "Shilling Fund," day by day continues to beg for indigent nurses, and the endowment of the College of Nursing, Ltd., on the ground, in the words of Sir Harold Boulton, that there are "thousands of devoted women who, at the end of the war, find themselves broken down in health, or without resources," that the Nation's Fund for Nurses has saved "from absolute want many nurses who have risked their health, their careers, their very lives for their country," and that "but for such assistance, thousands would have gone under, either while waiting for rolls of official red tape to uncoil, or because their particular case did not admit of support from official sources."

Frankly we do not believe that thousands of trained nurses who have returned from war-service, are in absolute want. We can well believe that the College of Nursing, Ltd., needs thousands of pounds for other purposes, and no doubt the indigent war nurse forms a picturesque front sheet for the double appeal.

But, if it is the case that there are so many "thousands" of war nurses in want, then this constitutes a very grave indictment of the War Office and the Army Nursing Board, and its constant re-iteration is bringing severe criticism, and discredit on the Government.

We hope now that Parliament has reassembled, that the Secretary of State for War will make searching enquiry into these assertions of widespread destitution of war nurses, and of callous neglect by the Government—for that is what the Nation's Fund, and *Daily Telegraph's* campaign for shilling doles amounts to.

## SAVE US FROM OUR FRIENDS.

Even the matrons on the College Council who are helping to promote this humiliating appeal must, we should imagine, be somewhat disconcerted by the efforts of their friends on their behalf, as for instance the effusions of the actress, Mrs. Martin Harvey, who has "inspected many hospitals in France and in this country," in what capacity is not stated.

The connection between an appeal for nurses, and the undisciplined behaviour of a V.A.D. (a beautiful young woman who radiated love and sympathy wherever she went), is not apparent. There was, says Mrs. Martin Harvey, near Etaples, at one time great inconvenience for lack of water to wash with, as "it was very dangerous to go in quest of water—in fact it was against orders." Nevertheless, in defiance of orders, this V.A.D. and a friend made a compact that the latter would keep guard, while she went three miles to the water, washed on the spot, and brought back two petrol tins of water to her friend. "On her way the shelling became very intense, and she was warned by a soldier who ran past, that it would be perfect madness to keep on the road, where

she would not 'stand one in six.' " Nevertheless, in direct defiance of orders, she persisted in her foolhardy escapade because "I should not have played cricket with my pal." This behaviour appears most commendable to Mrs. Martin Harvey, but we hope and believe that trained nurses are actuated by a higher sense of duty and discipline.

This lady also recounts, with gusto, the following horrible story:

"On one occasion we were playing in the receiving room of No. 4, Canadian Casualty Clearing Station, near Arras, where a temporary stage had been erected. The first three rows were occupied by sisters, and one of our men was singing a light song, when a shell burst close to the room, killing the man who was on the stage and one sister, and wounding two others. The killed and wounded were removed, and the performance continued, all the other nursing sisters still remaining in their seats till the end of the concert."

If this story is true the troupe to which Mrs. Martin Harvey was attached should have been at once deported from the war zone. That any nursing sisters should have participated further in a dramatic entertainment, with their colleagues dead and wounded in their midst, appears to us such an incredible instance of inhumanity that we hesitate to believe it.

## WHERE IS NURSE JULIET?

To turn from tragedy to comedy. There is what the *Daily Telegraph* calls the "sad 'Juliet' story," which "must have struck a sympathetic chord in many hearts," and which is responsible for extracting many shillings. (Fools and their money are soon parted.)

The "distinguished correspondent" of our contemporary tells the following story as "an eloquent plea for support of a fund, the success of which ought never to be in doubt."

The first time he met Nurse Juliet was "early in the war, when Lady—'s nursing unit was in London, about to start for the front. There was a send-off function, and many friends were taking tea with the doctors and nurses at the big hotel. . . . There was the buzz of animated conversation, and the sound of silvery laughter amid the clink of tea cups in the crowded room. The nurses were bright and happy, and the brightest and happiest of them all was Nurse Juliet. She was a handsome girl with a high colour and a cloud of golden hair, and she wore her V.A.D. uniform like one who has been accustomed to fine clothes.

"Yes," she said, "I ought to know how to wear my clothes. . . . I suppose I am what they call a mannequin. I had to put on the pretty dresses, and make the ladies think." . . .

"That they would look as pretty as you in them," I interjected.

"I daresay that is what it was," replied Nurse Juliet with a laugh and a blush." (We do

not know whether the blush signified gratified vanity or a twinge of conscience for having deluded her Society clients!) Nurse Juliet accounted thus for her new occupation. "How could I go on strutting about in finery . . . when our poor wounded boys were wanting women to look after them out there." (They were wanting trained nurses, and there were plenty making every effort to be sent, and being refused.) "So I joined the V.A.D.'s, attended Lady——'s training class, and here I am."

The "distinguished correspondent" next met Nurse Juliet of the golden hair and violet eyes, in a clearing station behind a knoll just off the broad road that led straight to the front trenches. (He would! although it is asserted that V.A.D.'s were never sent to Casualty Clearing Stations.) We have a lurid description of the barn used as an operating theatre, "a place filled with the odour of death and wounds, that caught you by the throat as you entered."

Nurse Juliet was "busy with sponges and bandages, helping a medical officer who was grappling fiercely with a shattered thigh." (Our only surprise is that this nursing expert was not herself performing this major operation. Surely, she had had sufficient experience to assume the surgeon's duties as well as the Sister's.)

Yet a third time the "distinguished correspondent" met Juliet—"in the High Street of a Midland town which had made more money than almost any other. Opulent manufacturers lounged in expensive motor cars, working men's wives in furs and feathers gazed at the shop windows speculating complacently on their next purchase." In strong contrast were "an elderly woman and a younger one, who came slowly along the pavement, both plainly dressed with the drab shawls, once commonly worn in the place, now seldom seen." Need we say the younger woman was Nurse Juliet, "a shadow, not merely of the beauty of the Bond Street show-room, but also of the grave young heroine of the field hospital."

The Bond Street show-room wanted none of her. "A trained nurse" (as she describes herself), "with uncertain eye-sight and shattered nerves;" she is not wanted for nursing either—but she thinks "the country is a little bit in her debt," and she believes it will look after her.

Why not apply to Dame Sarah Swift, D.B.E., Matron-in-Chief, Joint War Committee, which has thousands of pounds at its disposal, and which presumably was responsible for sending this mannequin to the front? Failing substantial assistance in this direction, we advise Nurse Juliet to personally interview the Secretary of State for War, and demand an explanation from him of the callous and cruel neglect to which, according to the *Daily Telegraph* and the "Nation's Fund for Nurses," the heroines of the war are now subjected by a thankless Government.

But what, anyway, have the trials of a V.A.D. to do with an appeal for the Endowment of the College of Nursing, Ltd., which professes to safe-

guard the interests of the Nursing Profession, and poses as an example of professional ethics and philanthropy, or with a Fund for the relief of nurses?

## NOT CRICKET.

We cannot prevent the Editor of the *Daily Telegraph* misleading his readers by omitting to publish protests from nurses who object to his Shilling Doles Scheme, neither can we prevent him making statements and conveying inferences in replies to enquiries which are not correct. Lord Burnham refused to receive a deputation from the Professional Union of Trained Nurses, and sent Miss MacCallum a long and ambiguous reply. Copies of this reply are being distributed to those making enquiries *re* the Fund, accompanied by the statement: "We also send you copies of the *Daily Telegraph*, which show that the College of Nursing has a membership of 17,000, whereas, the objectors, *scarcely number as many hundreds!* This lie has many times been disproved, but from whom did the Editor of the *D.T.* obtain his information? Moreover, why did he not inform his correspondents that Miss MacCallum was one of the 17,000 members of the College?"

Then, in another reply, the Editor of the *D.T.* refers to those who oppose this abominable appeal to the rank and file of the Navy and Army, as "certain interested bodies." How—interested? The Trained Nurses independent organisations are "interested" only in maintaining the self-government and power of self-support and self-respect of their profession, as opposed to charity, degradation and servitude. What right has the proprietor of any newspaper to cut at the root of the freedom and self-respect of any class of workers? He would not dare to do it with his own industrial staff. Their trade-unions would soon come to the rescue with down tools, and it is social autocracy where trained nurses are concerned, which is driving them in self-defence, to unite in the only type of organisation which can stand up to these arrogant plutocrats, and save their souls alive.

## A MASS MEETING OF PROTEST.

We learn that a Mass Meeting of free nurses is to be held in London, now that Parliament has re-assembled, to protest against the tactics employed by the *Daily Telegraph* in the conduct of its appeal, and to call the attention of the Secretary of State for War to the inference deduced from it, that the State has shamelessly neglected its duty towards Naval and Military nurses, in leaving them penniless and broken now that their services are no longer needed.

The attention of Dame Sarah Swift, D.B.E., and the Joint War Committee will also be directed to the "heartrending" necessities of "Nurse Juliet," V.A.D. (the beauty of the Bond Street Showroom) if she has not already succumbed to starvation, and found rest in a pauper's grave!



## YOUR MONEY OR YOUR LIFE!

COLLEGE SUPPORTS SHILLING DOLES  
FROM SAILORS, SOLDIERS AND V.A.D.'S.,  
FOR TRAINED NURSES.

The following letters have been sent from Headquarters to members of the College of Nursing, Ltd. The ethics and grammar are much on a par :—

The College of Nursing, Ltd.

February 3rd, 1920.

DEAR MISS BIGGAR,—In connection with the *Daily Telegraph* Shilling Appeal for the Nation's Fund for Nurses, now before the public, February 16th is being set aside specially for contributions from nurses themselves. These contributions will help to testify to the public how keen we ourselves feel in, not only helping those of the profession who have fallen on evil days, but also how anxious we are that we should have soundly-established Headquarters to build up a fine nursing service.

We greatly regret that a certain section of the profession is doing all in its power to prevent the Fund being a success. It is, therefore, all the more necessary for us to personally support the splendid effort being made.

Will you therefore, make a special effort to get into touch with the members of your Centre and make them aware that contributions are invited for February 16th?

Believe me to be,

Yours faithfully,

(Signed) M. S. RUNDLE, Secretary.

London Centre Club.

3. 2. '20.

DEAR MEMBER,—The above letter needs no explanation from me, I send it to you and rely on your generous response to it.

Contributions may be sent to our Honorary Treasurer Miss Copeman, Paddington Military Hospital, Harrow Road, who will send the total to the *Daily Telegraph* as from the "Members of the London Centre" of the College of Nursing, Ltd.

Yours truly,

M. M. BIGGAR, Hon. Sec.

## POWER OF THE POLICE.

We have made enquiries from the Headquarters of the City Police, as to the law in reference to Poster Parades in the City, and as we surmised, there is no law forbidding persons this rightful liberty, but the City Police arrogate to themselves the power to withhold permission for such Parades under any circumstances whatever. Outside the sacred precincts of the City the Metropolitan Police enforce no such restrictions, and permission is usually given to orderly citizens, such as trained nurses, to demonstrate against tyranny, such as that now exercised by the capitalist press, which ruthlessly excludes public opinion in opposition to its own policy, as in the case of the Protest of the nurses' self governing organizations against the *Daily Telegraph's* attack upon their economic status.

THE NATION'S FUND FOR NURSES, AND  
THE DAILY TELEGRAPH APPEAL.

"Let the shining, let the silver shilling from your pocket  
come  
For the outcast, for the heathen, for the rude Barbarium."

We've formed Committees, large and fine,  
Where miscellaneous Dames  
With Israel and Columbine  
And Lord Knows Who & Co. define  
Their philanthropic aims.

We've danced, and begged, and sold for Nurse,  
And left no stone unturned  
To make the millionaire disburse,  
And levy from the nation's purse,  
All she's so grandly earned!

And now we think not least, tho' last,  
To show their lively sense  
Of gratitude for service past,  
"Tommy," and "Jack" before the mast  
Should each devote twelve pence!

Yet, with such help on ev'ry side,  
Believe me, if you can!  
These thankless Madams all decide  
"Professions," in their lofty pride,  
"Ask nought of any man."

They bid all busybodies cease  
"Exploiting their affairs";  
If they are disinclined to fleece  
The winners of the Empire's peace,  
Surely the choice is theirs!

"Hands off our privilege," they say,  
"We claimed the blessed right,  
Without a thought of thanks or pay  
To give our best, when heroes lay  
Sore stricken in the fight."

"We had our thanks. No debts remain  
Out of that awful strife.  
Were we not paid when, cheated, pain  
Gave us our soldiers back again  
Into the warmth of life?"

"Were we not paid when some who lay  
Their sands outrunning fast,  
Seemed trying, as they turned away  
Their faces towards the Perfect Day,  
To bless us at the last."

Thus they who should be first to own,  
Our struggles for their weal,  
Adopt a most defiant tone,  
And, begging to be left alone,  
Refuse to come to heel!

But, having reached this painful pass,  
We still see nought amiss  
In firmly holding up *en masse*,  
This finely dedicated class  
In *forma pauperis*!

C. B. M.

## APPOINTMENTS.

### MATRON.

**Infectious Hospital, Fulwood, near Preston.**—Miss Minnie Riley has been appointed Matron. She was trained at the Birmingham Union Infirmary, and has held the position of Sister and Deputy Matron at the Isolation Hospital, Horwich, and Matron of the Isolation Hospital, Ormskirk, since November, 1913.

### MATRON AND SUPERINTENDENT NURSE.

**Toxteth Park Infirmary, Liverpool.**—Miss Fannie Brotherton has been appointed Matron and Superintendent Nurse. She was trained in the same institution and has been Staff Nurse at Chelsea Infirmary, Charge Nurse at Prescott Infirmary, Head Night Nurse at Aston Infirmary, and Superintendent Nurse at Barnsley, Belper and Sculcoates Infirmary.

### SUPERINTENDENT NURSE.

**Union Infirmary, Wakefield.**—Miss M. A. Holliday has been appointed Superintendent Nurse. She was trained at St. George's Infirmary, Fulham Road, and has been Sister at the Western Hospital, Fulham, (M.A.B.), Day Sister and Night Superintendent at the Shoreditch Infirmary, N., Second Assistant Matron, St. George's Infirmary, Fulham Road, First Assistant Matron, Township Infirmary, Leeds, and Matron at the Borough Sanatorium, Hastings.

### SISTER.

**Beckett Hospital, Barnsley.**—Miss A. Hogg has been appointed Sister. She was trained at the Leicester Infirmary, and has been sister at the General Hospital, Nuneaton, of the Military Ward, Coventry and Warwickshire Hospital, and Royal Infirmary, Chester.

**Isolation Hospital, Skipton.**—Miss M. Willcocks has been appointed sister. She was trained at the West Ham Infirmary; has been Staff Nurse at Whipps Cross Hospital, and Plaistow Fever Hospital, and holds the certificate of the Fever Nurses' Association.

### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

Her Majesty Queen Alexandra has been graciously pleased to approve the appointment of the following to be Queen's Nurses, to date January 1st, 1920 :—

#### ENGLAND AND WALES.

Margaret A. Baker, Mary Gossling, Helen Grimes, Emma Hall, Mary E. Roberts, Frances E. Johnson, Minnie Ethel H. Pay, Amy Tokins, Ethel E. Tompsett, Charlotte M. Huband, Jeanette D. Kimpford, Emmeline M. Morgan, Gladys Ashworth, Jane A. Breach, Ellen E. Bridger, May Griffiths, Gertrude M. Hovenden, Nellie E. Jones, Fanny E. Pike, Alberta R. Shoesmith, Elsie E. Smith, Mary F. Peardshaw, Beatrice Filley, Maud S. Haycock, Margaret M. Bowler, Dorothy F. Turner, Margaret B. Acheson, Grace M. Dunn, Lilian F. Galliot, Ellen M. Grale, Bessie F. Bond, Hilda M. Boston, Ethel Hutchinson, Maria Doccey, Beatrice Ockerby, Isabel Campbell, Mary Crossley, Gertrude E. Crimmer, Ada Washington, Bertha E. Smith, Nellie R. Russell, Ellen Birch, Gladys Miller, Nellie Smith, Violet A. Walker, Mary A. Bailey, Louie Lloyd-Acton, Annie Derbyshire, Grace Haigh, Alice M. Hanrahan, Edith E. Diplock, Louise Smith, Gertrude Taylor, Gladys Hyde, Elsie A. Baker, Edith Brown, Ethel Hesson, Edith H. Barrow, Mildred E. Sharman, Mary Hall, Annie F. Hawes, Annie Mindham, Alice L. Gould, Gladys M. Herd, Norah E. McNamee, Madeline C. Richardson, Ethel L. Tostevin, Isobel Meister, Lucy Harrison, Dora McLelland, Rose M. Miller, Margaret L. Foord-Kelsey, Dorothy Pierce, Maud

Plumb, Annie E. Westerman, Frances Agar, Carrie F. Channon, Minnie J. Evans, Margaret M. Cornock, Helen Macdonald, Alice Lewis, Alice M. Linton, Lilian Wild, and Clara M. Woodward.

#### SCOTLAND.

Jessie Bath, Ethel S. Bower, Mary A. Cameron, Amelia Cathcart, Annie Clarke, Margaret B. Crawford, Lilian Glover, Elizabeth L. Kane, Winifred E. Le Couteur, Martha A. McCallum, Janet McDowall, Jessie MacLean, Margaret Matheson, Minnie Morton, Jean M. Pringle, Grace M. Sellar, Jane T. West, Katherine Wishart, Annie MacFayden, Isabelle McGilp, Lilias D. Richardson, Helen M. Smith, Mary E. Watson, Marie J. Brown, Isabella F. Macfarlane, Mary F. Geraghty, and Janet M. Moyler.

#### IRELAND.

Catherine Marrinan, Jean F. Swan, and Jane Gilchrist.

## RESIGNATIONS.

Miss Gertrude Payne has resigned the position of Lady Superintendent of the Hospital for Sick Children, Great Ormond Street, London, W.C., where, including 2½ years when she acted as Assistant Matron, she has held office for a quarter of a century. The age of Miss Payne's successor is not to exceed thirty-five.

Miss Beatrice Cutler has resigned the position of Assistant Matron at St. Bartholomew's Hospital, London, which she has held since 1907. Her invaluable services and personality will be a great loss to the hospital, and she will be sincerely regretted.

Miss Cutler has had a varied and honourable career, amongst the positions she had held being that of Superintendent of the Medical School for Girls at Cairo (a training school for Egyptian nurses), Inspector of Pilgrims at El Tor, and Matron of the Much Wenlock Hospital. She was one of those who went out to Brussels in the first days of the war, and was in charge of the International Nursing Corps Unit, sent in response to a request from Dr. Marcelle to Mrs. Bedford Fenwick, under the authority of the Order of St. John of Jerusalem. She saw the German Army march into Brussels, and was deputed to nurse German soldiers. Miss Cutler has been awarded the 1914 Star, and is entitled to other war decorations. After thirty years' work she well deserves the rest and freedom to which she is naturally looking forward.

## A NURSE'S SAD DEATH.

The disappearance of a nurse, Miss Enid Pitts, from the London Hospital, on Monday, had a sequel on Tuesday, when she was found drowned on the beach near her home at St. Austell, Cornwall.

At the inquest in the afternoon Mrs. Pitts said her daughter, aged 24, had in recent letters complained of being hard worked at the hospital.

It is surmised that Miss Pitts travelled from London through the night and arrived at St. Austell by the 6 o'clock mail train. A verdict of "Found Drowned" was returned.

We offer sympathy to the mother of this nurse, in her bereavement.

The Minister of Health has promoted Mr. Richard J. Reece, C.B., M.D., to be a Senior Medical Officer of the Ministry.

## PROFESSIONAL REVIEW.

## HEALTH IN THE HOME.\*

A book by Dr. A. Knyvett Gordon, B.C., B.A. Cantab., commands attention both for its professional knowledge and literary merit, and we may add for the subtle satire which like a condiment, sparingly used, gives zest to the menu.

Dr. Gordon is sometime Exhibitioner, and Glyn Prizeman, King's College, Cambridge, University Scholar of St. Mary's Hospital, and formerly lecturer on Infectious Diseases in the University of Manchester, so his qualifications for his task are many.

The appearance of the book is particularly well timed, for the establishment of the Ministry of Health, and its resultant activities, have aroused the public interest in health questions to a greater degree than ever before. There was, therefore, need for a book which aims at putting the principles of preventive medicine in a popular form, and no one was better fitted to undertake this task than the author of "Health in the Home." The book should be read and studied by all who are concerned with the health of any section of the community, i.e., parents, teachers, medical students, nurses, midwives, and health visitors, and its price (5s. net.), brings it within the reach of all.

The contents are divided into three parts. Part I deals with the Mechanism of the Body and Health and Disease considered generally. Part II with Signs of Disease, and Part III with Domestic Hygiene.

In connection with the Mechanism of the Body the author lays down the principle that "before we can know anything about sickness we must have some conception of what the human body is—of what parts it is built up, and how it works." He reminds us, moreover, that "the body is by no means fool proof, and when we consider how it is misused by many and neglected by more, the wonder is not that illness results, but that it is not very much more common."

Discussing how the body can go wrong from illness, Dr. Gordon defines the most obvious causes as (1) those due to improper feeding—food deficient in quantity, excessive in quantity, or the use of the wrong kind of food.

(2) "One part of the body may be overworked or neglected through improper use. It is a fundamental truth of nature that constant work causes a part to wear out and break down, while intermittent use strengthens and develops it."

(3) "The body may be attacked from without. Very many diseases are known, and several more rightly suspected, to be due to the lodgment in the tissues of innumerable quantities of the bodies which we call microbes or germs. In considering what happens in such a case, we may conveniently keep to this conception of the landing of an

enemy army on the shores of our country." The soldiers of the defending army are the white corpuscles. "An illness results from two factors, attacks from without, and diminished resistance within."

## SIGNS OF DISEASE.

Part II deals largely with pain, first in general and then in its particular forms. Pain we are told, "is Nature's warning signal; it serves to indicate that there is something wrong with the body. That is as far as we can go, however, for there is no necessary relation between the intensity of the pain and the severity of the disease."

Dr. Gordon gives a grave warning against the empirical use of drugs by the public for the relief of symptoms, especially in cases of headache.

"The doctor, if he must use drugs at all in this and other ailments, does so only when they help to remove the cause; but when they are employed by the public they are taken to relieve symptoms only. The individual and domestic misery that results from this practice constitutes the skeleton in many a family cupboard."

Dealing with the question of colds, quite the worst name incidentally that could be given to the condition, as it perpetuates the old erroneous idea that they come only from exposure to draughts, Dr. Gordon points out that a cold is due to microbes, which multiply in the nose and throat. In many people the germs are almost always present, and whenever the patient gets run down a little they become more active and set up sneezing, running at the nose, and coughing. Many colds can be cured by discovering the microbe in the nose and making what is known as a "vaccine" from it, with the result that the patient is rid of his recurring trouble.

In regard to constipation in children, when due to an insufficiency of fat in the diet, Dr. Gordon speaks of the value of Virol, which supplies fat in a digestible form; for a similar reason he advocates its use in cases of emaciation and neurasthenia, when the higher nerve cells, which are largely composed of fat, require this substance for their rebuilding. He commends the use of Bovril as an article of invalid dietary, as more nourishing and cheaper than beeftea.

A word of warning is given on the subject of infection with the germs of enteric fever. "Many a nurse, for instance, has gone down with enteric fever by eating her food with fingers that have been recently touching the bedclothes of a patient. Hence great care should be taken by everyone in the house where a case is present never to sit down to a meal without washing the hands, and in fact never to touch food with the hands at all if it can be avoided."

As to what to do in fits, Dr. Gordon quotes the advice: "Let 'im fit," i.e., the attention of the onlookers should be confined to seeing that the patient does no harm to himself or his surroundings, and no attempt should ever be made to give a drug or anything else for treatment of the fit itself."

Neurasthenia is described as "in a way infec-

\* Jarrolds' Publishers (London) Ltd., 10 and 11, Warwick Lane, E.C. 4. 5s. net.

tious. The neurasthenic may be said to give out a cloud of mental poison gas which has a suffocating effect on the energy and optimism of those who are unfortunate enough to be brought in contact with him."

#### DOMESTIC HYGIENE.

The third section of the book (on Domestic Hygiene) is perhaps the most interesting of all, and much very valuable advice is given.

Dr. Gordon, in dealing with school life, refers to the "wicked feebleness that allows a boy or girl to grow up without a clear and healthy knowledge of the sex function and its relation to social life."

M. B.

### BOOK OF THE WEEK.

#### "GOLD AND IRON."\*

We look for good things from the pen of Mr. Hergesheimer, after such notable works as "The Three Black Pennys" and "Java Head," and in the volume under our notice, which contains three short stories, we are justified in our expectation.

The first, "Wild Oranges," is perhaps the best, though they are all up to standard.

It is full of thrill, mystery, and excitement.

John Woolfolk, whose life had been embittered by the tragic death of his girl-bride—"Young. A girl in a tennis skirt with a gay scarf round her waist—quite dead in a second"—had fled the world and led a solitary life on his yacht, with his faithful sailor, Paul Halvard.

He had anchored in a bay in the Southern States, where the water, as clear and hardly darker than the darkening air, lay like a great amethyst clasped by its dim corals and the arm of the land. It was, John Woolfolk suddenly thought, amazingly still. The atmosphere, too, was peculiarly heavy, languorous. It was laden with the scents of exotic, flowering trees; he recognised the smooth, heavy odour of oleanders, and the higher, clearer breath of orange blossoms.

His curiosity was aroused by the sight of a woman swimming in the bay, and he determined to go ashore to investigate what had appeared a very desolate spot. He knew by his chart that nothing could be close by but scattered huts and such wreckage as that looming palely above the oleanders.

One of Mr. Hergesheimer's greatest attractions is his descriptive power. The reader is caught into atmosphere at once fascinating and repellent.

Woolfolk's investigations lead him through the orange grove, where the cold, waxy leaves brushed his face. There was, he saw in the grey brightness, ripe fruit in the branches, and he mechanically picked one orange and then another. Before long he happened on the girl he had seen swimming in the bay.

Her white dress, though simply and rudely made, gained distinction from her free, graceful lines; her

feet, in heelless black slippers, were narrow and sharply cut. John Woolfolk was conscious of the disturbing quality of her person. She possessed the undefinable property of charm.

Against his will her attraction overmastered him, and the memory of his dead girl-wife began to recede into the shadows.

But he had to prove his love for her by violence and the cost of the life of his faithful sailor.

The homicidal maniac, Nicholas, the servant of Millie and her ineffectual father, had held the girl in terror with his unwelcome attentions, from which only the arrival of John Woolfolk's yacht in the bay could have saved her.

The closing chapter, which describes the death of the faithful Halvard, who stayed at the wheel until the ebbing of his life-blood left him no choice but to relinquish it, is a fine piece of writing.

"Tubal Cain" is a strong story of one Alexander Hulings, who became an Ironmaster against overwhelming odds, from sheer brutal force of character, and who married the daughter of the neighbouring Ironmaster—who could have bought him up—with the same determination.

The account of the industry is extremely interesting.

Huling's policy towards his inadequate staff is indicated by the following passage:—

"It was as if they had all been caught in a whirlpool, in which they fought vainly for release—the whirlpool of Alexander Huling's domination. They whispered together, he heard fragments of intended revolt; but under his cold gaze, his thin, tight lips, they subsided uneasily. It was patent that they were abjectly afraid of him.

Strange to say, he had married his rival's daughter because he loved her, rather than from ulterior motives.

"The Dark Fleece" is a story of a different type, and tells how Jason, of humble origin, had made a fortune on the goldfields, and how the Puritan woman to whom he was betrothed repudiated him, in spite of his faithfulness, on account of the rumours of his wild life, and how Honora, of the great house, attracted by his powerful personality, made love to him on her own account, and married him.

All these stories are virile and teem with interest.

H. H.

### COMING EVENTS.

*February 16th.*—National Baby Week Council and the National Sunday School Union. A Meeting at the Mansion House, "The Children's Era." Chair, the Lord Mayor. Speakers, the Right Hon. Lord Morris of St. John's K.C.M.G., the Viscountess Astor, M.P., and others. 3 p.m.

*February 18th.*—Royal British Nurses' Association. Lecture: "The Social and Moral Influence of Nurses as One of the Greatest Factors in the Welfare of the Human Race," by Miss Graham Hope. 11, Chandos Street, Cavendish Square, W. 5 p.m.

*February 19th.*—Central Midwives Board: Monthly Meeting.

\* By Joseph Hergesheimer. William Heinemann, London.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## KERNELS FROM CORRESPONDENCE.

*Miss L. L. Dock, U.S.A.*—"We are all just as happy as you are. Do write that history of registration campaign now." [Some day.—Ed.]

*An American Nurse.*—"We are having such strange things in this country, not only has the mantle of all the Junkers fallen upon our public men, but Torquemada, Judge Jeffreys, Philip the Second, and the stoners of Stephen, all seem to have come to life. We look at each other in bewilderment. Such a change in the twinkling of an eye is almost beyond belief. Heresy hunting and witch burning are revived as favourite pastimes. If it goes on, many, many innocent and humanity-loving persons will have to go to jail—many are there now. These things depress us and take away one's pleasure in everyday things." [We received just such an expression of opinion from Ireland a few days ago.—Ed.]

## RENDER TO CÆSAR.

*Irish Sister.*—"Render to Cæsar." I was delighted with the *B.J.N.* last week, making quite clear how much we Irish nurses owe to our wise and devoted pioneer in nursing reform—Miss Margaret Huxley. For thirty years, her wise guidance and generous help have been at our disposal and we hope we may have the benefit of her great organizing ability for many years on our Nursing Council. No one has greater practical experience of the needs of Irish nurses and of Irish methods. Even the most loyal of us have no sympathy with being governed from London. I read of the high sense of duty expressed by every speaker at Miss Huxley's Registration Dinner with pride. If inspired by such a public-spirited policy, our new Governing Body will do great things for the national health and for the nurses. Many thanks to you also, dear Editor, for your fearless fight upon our behalf. I have been a reader of your JOURNAL for many years and note you have always had a warm corner in your heart for us."

## SOME TRUTH IN IT.

*Another Poor Matron.*—"I agree with 'Matron of a Small Hospital.' We matrons of smaller hospitals do need commiseration. My great grief is that I cannot get the right sort of girl to train. The love of nursing is not the inspiration which it used to be. Times were when nurses had to be driven off duty. Now the difficulty is to keep them on. Then all this chatter in the press by irresponsible people who would not do a week's work themselves is very disconcerting. As to the 'tosh' (as Lord Ampthill would call it) in *D.T.*, it is simply nauseating."

## JULIET TAKES THE CAKE.

*A Young Officer.*—"My sister takes your paper. She sees red over this *Daily Telegraph* 'Shilling Doles Fund.' Slush we call it. What a pity newspapers cannot be muzzled as well as dogs! 'Juliet' fairly takes the cake. You know how greatly I revere the 'Red Capes' after all they did for me. Fancy offering those dear dignified ladies a shilling!"

## AN IRREFUTABLE CASE.

*Lady Superintendent.*—"How perfectly splendid of Councillor Beatrice Kent to lead that anti-doles procession, and how rare is this moral courage in our profession. I do admire it. If the Editor of the *Daily Telegraph* has the good case for trained nurses he professes, why does he refuse to see those who disapprove his policy and why does he boycott their letters and insert columns of bathos about V.A.D.s? I quite agree that such conduct of a public newspaper misleads his readers. The truth is he dare not publish our irrefutable case. It would smash up the appeal, and he knows it." [Quite so.—Ed.]

## NOTICES.

## TICKETS FOR THE NURSING PAGEANT.

As nurses' tickets at 5s. 10r for the Pageant are limited to 350, we advise those who wish to attend this historic function—in celebration of the passing of the Nurses' Registration Acts—to secure them as soon as possible.

Apply to Miss Macdonald, Secretary R.B.N.A., 10, Orchard Street, Portman Square, W.

Tickets at 10s. 6d. are available for doctors and the members of their families, and at £1 1s. for the general public. Refreshments are included.

Subscribers to this Journal, who wish to have their copy sent to a new address, are requested to notify the Manager, BRITISH JOURNAL OF NURSING, 431, Oxford Street, London, W. 1, by the Saturday previous to the week of issue, in order to ensure its being posted to the new address, otherwise this cannot be guaranteed.

Correspondents who desire an answer by post to their letters are asked to enclose a stamped envelope, as the correspondence of this journal has so largely increased.

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*February 14th.*—What conclusions might be drawn from a patient's posture in bed?

*February 21st.*—Frequent micturition in children. Describe causes and treatment.

# The Midwife.

## INFANTILE WASTING.

### NURSING TREATMENT AND MANAGEMENT.

By MISS JENTIE PATERSON.

Malnutrition, wasting, marasmus, are synonymous, and all carry the same tragic history, deprivation of the infant's birthright—mother's milk.

As the cure is its restoration, so the prevention is perseverance with breast feeding in the face of all obstacles. If artificial feeding has to be resorted to, it must be supplied in a humanised form, *i.e.*, sugar, fat and proteid, in the percentages found in human milk (sugar 7 per cent., fat 3.5 per cent., proteid 1.5 per cent.).

Ascertain the extent of wasting, by contrasting birth weight with present weight, and with that of a normal child of similar age. The feeding history is essential; all the varieties and amounts with which it has been slowly poisoned.

If the child is restless it must be nursed; if listless or moribund every ounce of strength husbanded but the position changed frequently. The temperature borders on the subnormal so warmth is essential, and watch must be kept for a sudden drop, but pure fresh air is also necessary. The urine is copious, as in extreme cases there is almost no absorption. The motions being bulky, frequent and foetid, grey powders are indicated ( $\frac{1}{8}$  gr. *t.d.s.* or six hourly). The back must be carefully guarded and watched and extra pads or diapers placed below the infant to avoid excessive wetting and soiling. Unless the baby be *in extremis* a dose of castor oil is given, preceded by a "feed" of boiled water and followed by one or two more before any milk is introduced. Then, if possible, the child should be put to the foster-mother's breast. (It is understood neither are syphilitic, and the mother of the child long ceased nursing.) If the foster-mother is unprocurable, human expressed milk should be collected from a reliable source. It has been found in extreme cases that to save life the child *had* to be actually suckled—proving that mothering is necessary. High rectal salines are cleansing and stimulating even if little is retained. Later, a common error is to give an aperient if thirty hours have passed without a stool; it is wiser to wait 36 or even 40 hours when generally a normal motion will result; the aperient, however simple, invariably sets up a recurrence of diarrhoea.

The caloric requirements of the child are ascertained by multiplying the weight of the child—say 8 lb. at four months—by the daily caloric allowance for its age =  $45 \times 8 = 360$  calories in 24 hours. Human milk 20 calories per ounce, humanised milk 18-19 calories per ounce, therefore 360 calories = 18 ounces of human milk, or one pint of humanised milk. The secret of feeding wasting babies is to be slow and sure; so begin with small quantities of human milk or a weak humanised

mixture, gradually increasing the calories in breast-feeding and the calories and percentages in artificial feeding. A peptonised feed with sugar 3.5 per cent., fat 1.7 per cent., proteid .8 per cent. can be increased till the maximum is reached. Increase in weight demands more calories. Sugar is frequently a difficulty, and one may try cane, lactose, maltose, or dextrine before being satisfied, or often a combination of two. The digestion is also gradually educated to deal with fat and eventually marasmic babies, when they start to make up weight, may deal with a 4 per cent.; they are also entitled to a high proteid (2 per cent.) and one-third or even a one-half more than their theoretical caloric allowance as they have "empty cupboards to fill." Four-hourly feeding is preferable and when the initial quantity given and retained is small the daily caloric allowance can be got in by giving a night feed about two a.m.; later, when the child can deal with larger quantities at a time, the night feed is dropped and no food is given between 10 p.m. and 6 a.m.

N.B.—Cod liver oil, being an animal oil with fixed percentage (100 per cent.) is excellent for infants. The amount given can be calculated to a minim. The best and most easily dealt with fat I have ever tried is undoubtedly the animal fat emulsion prepared and perfected by Dr. Truby King last winter.

## CENTRAL MIDWIVES BOARD.

### EXAMINATION PAPER.

FEBRUARY 4TH.

1. What is meconium, and of what does it consist? If you were to find it in the vagina what would you think, and what would you do?
2. Give the main causes of primary postpartum hæmorrhage. What means would you take to avoid this complication, and, should it occur, what would you do?
3. For what purposes do you use antiseptics during labour and the puerperium? State carefully how you would prepare the different antiseptics and in what strength you would use them, mentioning any special advantages or disadvantages each may possess for the different purposes.
4. Give the mechanism of the third position of the vertex presentation.
5. What would lead you to suppose that breast-feeding was not going on satisfactorily? How would you proceed to find out the reason? What means could be taken to improve or correct unsatisfactory breast-feeding?
6. Under what conditions might you require to use a catheter during labour? What are the objections to its use?



# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
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Vol. LXIV

## EDITORIAL.

### THE CENTRAL COUNCIL FOR DISTRICT NURSING IN LONDON.

The Central Council for District Nursing in London, which is holding its Annual Meeting on February 26th in the Board Room of the Metropolitan Asylums Board, Victoria Embankment, fulfils a very useful function in systematising and equalising the district nursing service of the Metropolis. Its Council is composed of representatives of the various interests, religious, philanthropic and official, concerned with District Nursing, with Mr. E. B. Turner as its Chairman. The Annual Report, submitted in draft, for the year 1919, makes several interesting announcements.

The Executive Committee went carefully into the question of District Nurses' salaries, as instructed by the last meeting of the Council, and fixed a minimum standard rate to be paid by all Associations participating in the distribution of grants through the Council (£50 clear in the case of a resident nurse, and not less than this sum in the case of a non-resident nurse, over and above a reasonable allowance paid in consideration of board and lodging. £115 has been taken to represent the last sum).

Among the sections of the community in need of assistance at the present time are, the Council states, the so-called "new poor," and it is hoped to take effective action to provide "visiting nurses" for persons of limited income during the coming year. Sir R. Douglas Powell, who drew attention to this need in the press, has consented to join the Council.

A Panel of Nurses willing to undertake temporary work has been formed, and thirty-one nurses have been entered on the panel, and are ready for employment.

In view of the special needs of the Associations, the Trustees of the London Parochial Charities have increased their Annual Donation

from £1,000 to £2,000. The Council further announces that in view of the announcements in the press in regard to the devotion of some of the surplus funds of the British Red Cross Society to Nursing, the Executive Committee made strong representations to the Director for the County of London, on behalf of the Metropolitan Nursing Associations, and have been informed that the sum of £10,000 will be entrusted to the Council for distribution, consideration being specially given to the work done on behalf of ex-service men.

The Insurance Committee of the County of London has also made a contribution of £500 for distribution, "on the understanding that every effort will be made by the Central Council to ensure that insured persons in London will be provided with nursing treatment and incidental advantages." It is accordingly proposed that "arrangements be made with the District Nursing Associations for securing the provision of home nursing services for insured persons, and that negotiations be continued with Approved Societies in order to secure contributions from their funds in respect of the nursing of their members."

Through the liberality of the City Parochial Foundation, which has granted a sum of £100 for the training as midwives of nurses in District Nursing Associations affiliated to the Council, it has been enabled to allocate four bursaries of £25, two being given to the Metropolitan Federation of Queen's Nursing Associations, one to the Ranyard Nurses, and one to the unaffiliated Associations. The candidates receiving these bursaries will not necessarily have to practise as midwives, but they must act as maternity nurses in London for at least two years. The Council has been informed that the same help will be forthcoming in the ensuing year. There is thus an opportunity for much usefulness before the Council.

## NURSING ECHOES.

On May 12th Princess Mary will lay the foundation-stone of the Nurses' Home in the grounds of the Royal Hospital and Home for Incurables, Putney, and is to be presented with a dainty silver trowel, with an ivory handle, which has been presented by Walker & Hall, of Holborn and Sheffield. The Princess will receive purses of five guineas and upwards.

*The Canadian Nurse* reports that a silver cross, hung from a purple ribbon, is to be given to any mother in Canada who lost a son in the war.

A meeting of the Council of Queen Victoria's Jubilee Institute for Nurses was held last week at the offices of the Institute. The report for 1919 was approved for submission to the Patron, Queen Alexandra. The number of associations affiliated during the year was the largest since the foundation of the Institute. At the same time, although a considerable number of nurses have been attracted to district nursing, there is still a great deficiency, especially of those who are willing to practise midwifery. It was recommended that, with the approval of Queen Alexandra, the gold badge should be awarded to Miss A. M. Peterkin, the General Superintendent, in recognition of the services she had rendered to the Institute. While the demands on the Institute are increasing in every direction, the funds at the disposal of the Council are inadequate. It is estimated that the expenditure for this year will exceed the income by at least £5,000.

Now that the Irish Secretary has done so well with his General Nursing Council—only one flaw, a working nurse should have found a seat—English and Scottish Nurses are on the *qui vive* as to what their fate is to be. Dr. Addison has promised to do his best. We don't envy him his task.

In the House of Commons last week, Major Hurst asked the Secretary of State for War whether masseuses of the military massage service were entitled to receive gratuities on the termination of war service; and if not, why there should be any differentiation between them and other nursing sisters. Sir Archibald Williamson replied that war gratuities, broadly speaking, were given to commissioned officers and enlisted soldiers, and were not given to the very large number of civilians, men and women, who in various ways worked for the Army during the war. An exception was made in the

case of Queen Alexandra's Imperial Military Nursing Service, and other Staffs performing similar duties, for special reasons, and in accordance with precedent. After very full consideration he was not prepared to extend this exception.

We sympathise with the nurses of Victoria in having their Registration Bill held up at the last moment, after it had passed through all its stages, owing to the objection of hospital committees to the provisions made for reducing the hours of work and increasing the wages of nurses. On being returned to the Legislative Assembly by the Legislative Council, that body made the proposal that hospitals should be recouped, out of public funds, for the additional expense that would be entailed in the restriction of the hours of employment of trainees. This amendment the Speaker held to be an infringement of the privilege of that Assembly, as it was an attempt to impose financial charges or burdens on the people, and moved that the House should decline to accept it. This was agreed. As the Legislative Council had already adjourned, the Bill could not be further considered.

The nurses, however, may take comfort from the fact that there is now a possibility of amending the Bill, which at present is far from a good one. It is a cardinal error to introduce into a measure dealing with the education, registration and discipline of nurses, provisions dealing with their hours of work and pay, which should be incorporated in an entirely separate Bill. This was a vital mistake in the Bill promoted in this country by the College of Nursing, Ltd., for if all these matters were controlled by one body, trained nurses would be reduced to a condition of serfdom.

"The Nurse and the State" was the subject of a paper by Dr. N. M. Falkiner at the Statistical and Social Inquiry Society of Ireland, at a meeting on February 13th. In 1872, he said, he visited the Dublin hospitals, and there were no trained nurses at that time, but reforms assumed a concrete basis on the establishment of the Dublin Technical School for Nurses in 1893, the founder of which was Miss Margaret Huxley. The paper referred in eulogistic terms to St. Patrick's Nurses' Home, and St. Lawrence's Catholic District Nurses' Home; commended them to the continued support of the public; and advocated the extension of the district nursing system to the overburdened and struggling middle classes.

The author concluded by saying that the following points should be considered regarding

the nurse:—The standard of her physical health; the age for commencing professional training; her preliminary education and examination; her professional training, both in the hospital and the school; and her final examination before being registered as a trained nurse. Further, the creation of an advanced diploma in Nursing Science; the Public Health or Community Nurse, to administer the numerous activities concerned with the health of the people that are now being instituted; and the extension of the District Nursing system to meet the requirements of the public. On the part of the public, it is our duty to provide that the remuneration of the Trained Nurse is adequate; that her working hours are reasonable; that her holiday is sufficient to permit her to recoup her strength after her arduous professional duties; and that a suitable pension be attainable when the faculty of exercising her nursing skill becomes impaired.

In the discussion which followed, Mr. Shannon Millen urged the abolition of the abomination popularly known as the "handy woman." Miss Huxley said much remained to be done to standardise the education of nurses. Dr. Craig, President Royal College of Physicians, said that he thought it a most disgraceful thing that nurses should be put in a position of feeling that they were charitable objects. He had for years been advocating that nurses should receive adequate remuneration, and that their services should be made pensionable. There should be no question of charity about it. Sir Jos. Glynn, while congratulating the lay nurses on having come into their own, reminded the meeting of the work of the pioneers in nursing among the Sisters of Mercy and kindred communities. Dr. Coey Biggar, Chairman, Irish Council of Health, said that public health matters had got an impetus, and the State was ready to pay half the services for the nursing of certain classes of cases. He hoped that in the next Public Health Bill there would be co-ordination in the manner in which grants were given to local bodies. Sir John O'Connell also took part in the discussion. Miss Michie (Queen Victoria's Jubilee Institute) said that Jubilee Nurses should be paid a living wage, and be able to look forward to a pension; and Miss Reeves (Matron, Stevens' Hospital) emphasised the importance of the thorough training of nurses, and said that she would like to see definite teaching being given with a view to hospital work.

Dr. E. MacDowel Cosgrave and other speakers also addressed the meeting.

## HONOURS FOR NURSES.

The King held an Investiture at Buckingham Palace on February 21st, and conferred the following Order and Decorations.

### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE. OFFICERS.

Matron Jessie Jackson, Queen Alexandra's Imperial Military Nursing Service Reserve (also received the Royal Red Cross, First Class).

### THE ROYAL RED CROSS AND BAR.

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Daisy Michell.

### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss May Bonser and Miss Hilda Drage.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Edith Davenport.

*Territorial Force Nursing Service.*—Miss Mary Dickinson, Miss Maud Dunn, Miss Margaret Newbould, and Miss Edith Pilson.

*Civil Nursing Service.*—Mrs. Mary Millar.

### [THE ROYAL RED CROSS (SECOND CLASS).]

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Isabelle Baron, Miss Mabel Davis, Miss Laura James (also received the Military Medal), and Miss Mary McNaughton.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Mrs. Mary Binks, Miss Julia Clancy, Miss Bessie Dickson, Miss Constance Eason, Miss Martha Edge, Miss Margaret Hilliard, Miss Mary Smith, Mrs. Townsend, and Miss Grace Winter.

*Territorial Force Nursing Service.*—Miss Helen Darge, Miss Louise Dennis, Miss Christina Davidson, Miss Cecilia Lister, Edith, Mrs. Mercer, and Miss Shirley Wilson.

*Civil Nursing Service.*—Miss Joan O'Sullivan and Miss Lillias Pumphrey.

*British Red Cross Society.*—Miss Lucy Hughes.

*Voluntary Aid Detachment.*—Miss Blanche Baldwin, Miss May Broadbent, the Hon. Mrs. Henrietta Leith-Hay, Mrs. Hilda Llewellyn, Miss Amy Neale, and Miss Hilda Randolph.

### THE MILITARY MEDAL.

Miss Elizabeth Eckett, Territorial Force Nursing Service, and Miss Selma Valentine, Voluntary Aid Detachment.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross and the Military Medal, subsequent to the Investiture at Buckingham Palace.

The King has been pleased to award the Royal Red Cross to the following Ladies in recognition of their valuable nursing services in connection with the war:—

### BAR TO THE ROYAL RED CROSS.

Miss E. Holden, R.R.C., Matron, T.F.N.S., 3rd London Gen. Hosp., Wandsworth; Miss J. Melrose, R.R.C., Principal Matron, T.F.N.S., R. Infirmary, Glasgow; Miss F. N. Roberts, R.R.C., Assist. Matron, Q.A.I.M.N.S., Alexandra Hosp., Cosham; Miss E. A. M. Wilson, R.R.C., Principal Matron, T.F.N.S., 3rd W. Gen. Hosp., Cardiff.

### ROYAL RED CROSS, FIRST CLASS.

Miss E. Bramwell, A.R.R.C., Sister, Bermondsey Mil. Hosp., Ladywell; Miss A. Brooks, Matron, King Edward VII Hosp., Windsor; Miss A. J. D. Durward,

A.R.R.C., Sister, Q.A.I.M.N.S.R., Queen Mary's Mil. Hosp., Whalley; Miss K. Fitton, A.R.R.C., Assist. Matron, Q.A.I.M.N.S.R., Pavilion Gen. Hosp., Brighton; Miss M. Gregory, Assist. Matron, Q.A.I.M.N.S.R., Mil. Hosp., Chiseldon Camp, Wilts.; Miss E. H. Hay, A.R.R.C., Matron, Q.A.I.M.N.S., Mil. Hosp., Catterick Camp, Yorks; Miss A. Howard, A.R.R.C., Assist. Matron, T.F.N.S., 3rd London Gen. Hosp., Wandsworth; Miss E. M. Humphries, A.R.R.C., M.M., Matron, T.F.N.S., 2nd Scottish Gen. Hosp., Craigleith; Miss E. Hutchings, A.R.R.C., Matron, Spec. Mil. Surg. Hosp., Blacklock, co. Dublin; Miss R. M. Rooke, A.R.F.C., Assist. Matron, Q.A.I.M.N.S., Alexandra Hosp., Cosham; Miss M. C. Sinzinenex, A.R.R.C., Matron, Queen Alexandra's Hosp. for Off., Highgate; Miss P. E. Smith, A.R.R.C., Matron, T.F.N.S., 2nd N. Gen. Hosp., Beckett Park, Leeds; Miss A. H. Turnbull, Matron and Supt., Church of Scotland Deaconess' Hosp. Miss L. M. Wass, A.R.R.C., Sister, Q.A.I.M.N.S.R., Queen Alexandra's Hosp., Grosvenor Road, London; Miss E. White, A.R.R.C., Matron, T.F.N.S., Spec. Mil. Surg. Hosp., Cowley, Oxford.

## WAR AWARDS, TO WHICH TRAINED NURSES WHO FULFIL THE CONDITIONS ARE ENTITLED.

### THE 1914 STAR.

A distinctive decoration granted by the King in recognition of the services rendered by His Majesty's military forces under the command of Field-Marshal Sir J. D. P. French, G.C.B., G.C.V.O., K.C.M.G., in France and Belgium during the earlier phase of the war in 1914, up to midnight November 22nd-23rd, 1914.

The decoration is a star in bronze, with red, white and blue riband, shaded and watered.

Provided the claims are approved by the Army Council, the Star is granted to Nursing Sisters, Nurses and others employed with military hospitals, who actually served in France or Belgium, on the establishment of a unit of the British Expeditionary Forces between August 5th, 1914, and midnight of November 22nd-23rd, 1914.

In the case of deceased officers and other ranks applications from their legatees or next-of-kin should, in the former case, be addressed to the Secretary, War Office (A.G. 10), and in the latter case to the officers i/c records concerned.

Discharged or demobilised personnel who are entitled to the Clasp to the 1914 Star for those who served under fire in France or Belgium between August 5th and November 22nd, 1914, can obtain forms of application at any head or branch post office in a town, or at any post office in the country districts. The forms should be completed in accordance with the instructions thereon and forwarded to the officer in charge of the Corps with which they last served.

Applications made otherwise than on these forms will be ignored.

### THE 1914-1915 STAR.

A distinctive decoration granted by the King in recognition of the services rendered by His Majesty's military forces in France and Belgium between August 5th, 1914, and December 31st, 1915. The decoration is a star in bronze, with red, white and blue riband, shaded and watered.

Provided the claims are approved by the Army Council the Star will be granted to Nursing Sisters, Nurses and others employed with military hospitals, who actually served on the establishment of the

theatres of war enumerated above, with the exception of the Russian theatre. Individuals in possession of the "1914 Star" will not be eligible for the award of this decoration. Applications from legatees should be addressed to the Secretary War Office (A.G. 10), and in the latter to the officer in charge of records concerned.

### THE VICTORY MEDAL.

A Medal granted by the King in recognition of the services rendered by His Majesty's military forces in theatres of war since August 5th, 1914.

The medal is in bronze attached to the riband by a ring.

The riband is red in the centre with green and violet on each side, shaded to form the colours of two rainbows.

Provided the claims are approved by the competent military authorities the medal will be granted to nursing sisters, nurses and others employed with military hospitals who actually served on the establishment of a unit in a theatre of war within the periods as defined in Appendix A of Army Order 301, 1919.

The "theatres of war" defined in this Order, and further elaborated therein are: (1) Western European Theatre; (2) Balkan Theatre; (3) Russian Theatre; (4) Egyptian Theatre; (5) African Theatre; (6) Asiatic Theatre; (7) Australasian Theatre.

The medal is identical in design with that issued by other Allied and Associated Powers for service in theatres of war, and obviates the interchange of Allied Commemorative war medals.

A preliminary issue of the Victory Medal Riband is now made to those entitled to the medal. Demobilised members of the nursing services should make individual application as follows:—*Members of Q.A.I.M.N.S.* to the Secretary, War Office (A.M.D.4), Cornwall House, Stamford Street, E.C.1, giving particulars of service. *Members of T.F.N.S.*, to the Secretary, War Office (T.V. 4), 80, Pall Mall, S.W.1.

Members of other organisations who are entitled to the "Victory" Medal, and who are not now serving, should submit their application for the riband to the Head of the Organisation under which they served.

### EMBLEM ON RIBAND OF VICTORY MEDAL.

The King has approved of the wearing of an emblem on the riband of the Victory Medal by all *personnel* on the strength of the British, Dominion, Colonial, and Indian Expeditionary Forces, who have been mentioned in dispatches during the war.

The emblem will be an oak leaf in bronze, and two emblems will be supplied in each case. Additional emblems will not be worn in respect of a second or subsequent mention.

### BRITISH WAR MEDAL, 1914-1919.

A medal granted by the King to record the bringing the war to a successful conclusion, and the arduous services rendered by His Majesty's Forces.

The medal in silver will, provided the claims are approved by the competent military authorities, be granted to all who served on staffs of military hospitals, and all members of recognised organisations who actually handled sick and wounded, who entered a theatre of war on duty, or, who left their places of residence and rendered approved service overseas, other than the waters dividing the different parts of the United Kingdom, between August 5th, 1914 and November 11th, 1918, both dates inclusive. The riband is centre orange, watered, with stripes of white and black on each side and with borders of royal blue.

The riband may now be worn by all ranks who are entitled to the award of the British War Medal.

Demobilised members of the Q.A.I.M.N.S. should apply to the the Secretary, War Office (A.M.D.4),

Adastral House, London, E.C.4; demobilised members of the Territorial Force Nursing Service, to the Secretary, War Office (T.V.4), 80, Pall Mall, London, S.W.1. Members of other organisations who are not now serving, should apply to the Board of the organisation under which they served.

#### CHEVRONS FOR SERVICE OVERSEAS.

The King has approved the award of chevrons to denote service overseas undertaken since August 4th, 1914.

The following will be eligible to participate in the award under the conditions laid down.

Members of Queen Alexandra's Imperial Military Nursing Service, retired members of the Army Nursing Service, members of Queen Alexandra's Military Nursing Service for India, the Territorial Force Nursing Service, and Overseas Nursing Services. Personnel working under the Joint War Committee of the British Red Cross Society and the Order of St. John of Jerusalem; and under the St. Andrew's Ambulance Association, if under the direct authority and supervision of the War Office.

Chevrons of two colours, red and blue, have been approved. The first earned on or before December 31st, 1914, will be red, all others blue.

### A REPORT OF GOOD WORK.

The final meeting of the Territorial Force Nursing Service Ladies' Committee was held at the Royal Infirmary, Edinburgh, on Monday February 16th, Miss Haldane in the chair.

Miss Gill, R.R.C., Principal Matron, read a report of the closing of Craigleith Hospital, and paid a high tribute to the efficiency of the nursing staff.

She stated that she had never received a single complaint of any nurse during the five years that the hospital was open, and those members who were sent abroad have reflected great credit on their hospital.

The following decorations had been awarded to members of the staff either at home or abroad:

Bar to the Royal Red Cross, 2; Royal Red Cross (First Class), 8; Royal Red Cross (Second Class), 33; Military Medal, 3; Serbian Decorations, 2; Medaille des Epidemies, 1.

Mrs. MacLagan Wedderburn gave a report of the work done by the "Comforts Committee" since 1914, and by the Handicraft Branch, which was formed to provide employment and amusement for the patients.

The *Craigleith Hospital Chronicle* was founded at the end of 1914 at the suggestion of the O.C., in order to raise funds for extra comforts for the patients, and over £360 was raised.

The Treasurer's Report, submitted by Miss Thorburn stated that £1,260 had been spent on extra comforts.

A cordial vote of thanks, proposed by Mrs. George Kerr, was given to Mrs. MacLagan Wedderburn and Miss Thorburn for their splendid services.

Miss Haldane, in conclusion, expressed very cordial appreciation of the work of the Committee under the wise guidance of Miss Gill, during these five years.

## THE GENERAL NURSING COUNCIL, IRELAND.

### AN INCORRECT STATEMENT.

We are requested to correct the statement made last week in the medical journals and in the *Nursing Times* that Colonel Sir Arthur Chance, F.R.C.S.I., who has been appointed a member of the General Nursing Council, Ireland, is the Chairman of the Irish Board of the English College of Nursing. Colonel Sir Arthur Chance, as reported in this Journal last week, is Chairman of the Irish Nursing Board, an Irish organisation which has compiled a voluntary Register of Irish nurses, and has never had anything to do with the Irish Branch of the College of Nursing, Ltd.

Colonel Sir Arthur Chance, Colonel William Taylor, F.R.C.S.I., and Miss O'Flynn are the delegates of the Irish Nursing Board on the Central Committee for the State Registration of Nurses, and Miss M. Huxley and Miss A. Reeves are the delegates of the Irish Nurses' Association on the Central Committee, and have all been placed upon the General Nursing Council, Ireland. Irish nurses owe a deep debt of gratitude to these pioneers for the keen interest they have always taken in the State Registration question, and the firm manner in which they have one and all supported their best interests whilst nursing legislation has been under discussion.

### A ROYAL GOVERNOR.

The Prince of Wales had a great reception at Bart's on the 19th inst., when he paid a visit to that historic hospital to attend a general Court of Governors in the Great Hall to receive his Governor's Staff and his Charge as President. The Prince was received by the Treasurer, Lord Sandhurst, and the Lord Mayor.

For the first time the senior nursing officers were summoned to the Great Hall, and greatly appreciated being present to see His Royal Highness take the chair, amid cheers, and sign the minutes. In the Square the nurses gave him a smiling welcome, and the patients lying in their beds also enjoyed the occasion.

Subsequently, His Royal Highness visited the wards, which looked very spick-and-span. Altogether a very happy occasion.

### FEES RISE IN AUSTRALIA.

The members of the Australian Trained Nurses' Association have recently, by 623 votes to 160, decided that the fees of general private nurses shall be raised from £3 3s. to £4 4s. a week. The new scale of fees came into force this year.

It is recommended by the Council that the following part time charges be adopted: For 24 hours, £1 1s.; for 48 hours, £2 2s.; for 72 hours, £3 3s.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## THE NATIONAL ORGANISATION FOR PUBLIC HEALTH NURSING.

Her Royal Highness the Princess Christian, on behalf of the Corporation, has written a letter to the Hon. Secretary of the National Organisation for Public Health Nursing (New York), expressing her own good wishes and those of the members of the Royal British Nurses' Association that great success may attend the Convention which the National Organisation is to hold in Atlanta in April.

An invitation has been sent to the chief official of the Royal British Nurses' Association to take part in the Convention, an act of courtesy which H.R.H. the President and the members of the Association greatly appreciate.

## THE NURSING PAGEANT.

The Nursing Pageant promises to be a great success, and many friends are giving invaluable help. The characters are already nearly all allotted, and there is much research about costumes. Several Irish friends are to be with us. Three of the most important parts are the three Nursing Acts. Miss M. Heather-Bigg will bring in the Act for England and Wales; and Miss Alice Reeves, a Nursing Councillor for Ireland, the Irish Act. "Legal Status" will present them to Hygeia, who, no doubt, will have something important to say to them; but that is in the hands of Miss Mollett, who is writing the words for the new Section. Miss F. Sleigh is designing new Bannerettes for "Edith Cavell" and "Jane Delano," two of the heroines of the Great War.

## ROYAL RED CROSS (FIRST CLASS).

It is with great pleasure that we learn that Miss Sinzininex, A.R.R.C., has been awarded the Royal Red Cross, First Class.

Miss Sinzininex was Matron of Queen Alexandra's Hospital for Officers, Highgate, and proved herself a most able organiser and a very popular Matron. She holds the Diploma of the Royal British Nurses' Association, which is the

only body of nurses which grants a Diploma in Nursing.

## THE MORAL AND SOCIAL INFLUENCE OF NURSES ON THE RACE.

Under the auspices of the Association, Miss Graham Hope gave a lecture, which was greatly appreciated by the nurses present, on the Moral and Social Influence of Nurses on the Race. At the last moment Miss Heather Bigg was prevented from being in the Chair, as had been arranged, and Miss Wise took her place. The latter said that any remarks from her that afternoon were really superfluous, for Miss Graham Hope was so well known for the interest she took in social questions, and was equally well known as a writer and novelist. All would agree that the subject of her paper was one very full of interest, and that nurses must realise how wide was their influence, and therefore their responsibility, so that they greatly valued the kindness of a speaker, so well versed in national questions, in addressing them.

In commencing her lecture, Miss Graham Hope said that, although not a nurse herself, she might claim to have an inherited interest in nurses as various relations of her own had, in the past, done important work for nursing and nurses. In many cases people who had worked during the war with great energy had now more time for thinking, and in cases of illness they certainly did not wish to be told about other people's illnesses. Indeed they shrank from this. Social life has now to be resumed as it should exist in time of peace, and what people want is not Socialism but sociability. Human nature is much the same all the world over. The rich may just as readily have good qualities as the poor, and they may just as readily have bad qualities as the poor. True Socialism lies in looking on each human being, whether rich or poor, with exactly the same attitude of mind. There is too great a tendency for people to cut themselves loose altogether from old ideas and to start, so to speak, all afresh. Nurses have great opportunities for trying to rouse people to realise their responsibilities, to take up life seriously. One need only look around and observe how people dress, for instance, to realise that some of them almost verge upon being insane.

It would seem as though no one had been



brought up in any sort of definite religious ideas; but as though all were feeling about for any kind of fantastic form of religion, as though the only thing that mattered was to cut away from all the old bonds and, with all the new types of religion introduced at the present time, there always seemed some catch to divorce religion from everyday life. It is in such circumstances as these that the influence of nurses is often very valuable in persuading patients to be very careful in taking up any new religion, to examine the old religion, and to see whether after all it is not really the most helpful. The same vital facts after all underlie most religions. Miss Graham Hope also spoke on the influence which nurses might exercise in encouraging thrift and a knowledge of the responsibilities of motherhood.

In the discussion which followed Miss Macdonald spoke of the need for a greater versatility in the nurses' interests and recreations, if they were to lead more normal and healthy lives. Miss Giffen spoke in support of Spiritualism, and another member of the audience said that the greatest bar to progress, as far as the nurses are concerned, seemed to her to be that all their health and strength were given up to matters connected with disease, and they had not even time to read the daily papers. What they wanted was more time to open and widen their minds. Miss Box said that she had been a nurse for thirty years, and her view was that the nurses never recovered from their years of training. The hours were too long, the work was heavy, and the nurses too much burdened with duties that were not nursing at all, but which should be done by servants; they came out of hospital to start out on a career of their own in a state of exhaustion.

Miss Wise closed the meeting with a few graceful words of thanks to Miss Graham Hope for her address, which were warmly endorsed by those present.

## "OPEN YOUR EYES."

### THE LATEST HEALTH PROPAGANDA FILM.

A private rehearsal of this powerful drama was given at King George's Hall, London Central Y.M.C.A., on February 10th. The *purpose* is precisely the same as "The End of the Road," which appeared elsewhere in London some weeks ago, and which was reported in this JOURNAL, namely, to arouse the apathetic, ignorant, and prudish public to a sense of their corporate responsibility towards the young of both sexes in the matter of social purity. Parents and guardians are urged to make known to them the fearful results of moral laxity.

In a few introductory remarks the spectators were informed that the film was produced in America under the supervision of the U.S. Public Health Service, where it has been shown, and it was thought that the "conspiracy of silence" can only be effectually overcome by breaking down false modesty and by calling a spade a spade, and teaching the young.

The play opens with a scene in the lecture room of a New York hospital, where a very eminent physician, who has made an exhaustive study of venereal diseases, is seen lecturing to other physicians. One pithy remark is worthy of special notice. "*When a young daughter is entering upon marriage it is far better that her father should look up the young man's doctor than to enquire into his connection with Broadway.*"

It is mainly on the social effects of immorality rather than the physical that the producer has based his argument, although the physical side is not concealed. A few vanishing pictures illustrating the ravages of disease are shown, but not dwelt upon. By this restraint it is supposed that the field in which the film may be utilised will be greatly widened.

The story deals with the careers of two young girls just entering upon the threshold of marriage. Kitty Walton has been instructed in sex subjects, and is therefore protected and forearmed. Frances Forrester is the pathetic figure, whose worldly mother seeks only a wealthy rather than a pure partner for her daughter; she is betrayed and infected by her libertine lover, Alexander Valentine. The chief feature of the story—and one in which it differs essentially from "The End of the Road"—is the special point it makes of the widespread harm done by quacks, whose false promises of speedy cures do such incalculable harm by fostering disease. From a technical point of view the film is admirably produced. The acting, setting, and photography are all good.

If it is true—and we have no reason for doubting it—that more deaths occurred during the war from venereal diseases than on the battlefields, then, sorrowful as the subject is, we say emphatically that we can scarcely have too many *eye-opening* plays of this sort.

B. K.

### APPOINTMENT.

Miss Brotherton, formerly Matron of Sculcoats Union Infirmary, has been appointed Matron of Toxteth Infirmary, Liverpool.

### MARRIAGE.

On February 4th, Mr. Stewart Murray was married to Miss Jean Morris, at Gorsebank, Wolverhampton.

### HELENA BENEVOLENT FUND.

The Hon. Treasurer acknowledges with thanks the following donations:—

£1.—Miss Liddiatt.

10s.—Miss Mellenfield.

5s.—Misses A. Briggs, C. Carter, A. Lewis and Roberts.

4s.—Misses Clifford and Wethered.

2s. 6d.—Mrs. Robson, Misses Bennett, Briant, Cattell, M. E. Dyke, Probert and Winton.

2s.—Misses Bartlett, D. Bayley, M. Bell, A. Ford, S. Newcombe, S. Ramos and Whatling.

ISABEL MACDONALD,  
Secretary to the Corporation.

10, Orchard Street, W. 1.

## DOWN WITH DOLES.

### DAILY TELEGRAPH MISLEADS ITS READERS.

The Editor of the *Daily Telegraph* continues to exclude every communication in opposition to the Shilling Doles for Nurses' Fund—thus entirely misleading the readers of his paper as to the strong feeling of indignation by which self-respecting nurses are inspired. A very gross abuse of power.

#### "NURSE JULIET."

Last week we demanded "Yes" or "No" from the *Daily Telegraph* to our enquiry as to the existence of the Bond Street mannequin, the V.A.D. "Nurse Juliet"—whose highly coloured story was used to conjure money from the public.

To this enquiry no answer has been forthcoming either addressed to this Journal or in the *Daily Telegraph*. We fear we must conclude there isn't "any such a person." For which mercy our sick and wounded and their friends may be thankful.

#### WHERE ARE THEY?

Miss May Beeman is issuing letters to country papers inviting them to support the *Daily Telegraph* Doles Fund. To cull from these wails: "We feel that were the heartrending cases of misery and want amongst some of our Nurses more widely known, there are thousands of people who would give their shillings."

It is high time all this "misery and want" was inquired into by responsible persons, and not by professional charity-appealists. We do not believe it exists. Anyway, the Government is responsible for War Nurses, and the Committees who employ the starving hordes. Let these inhuman taskmasters be brought to account.

In the meanwhile, why does Miss Beeman omit all mention of the College of Nursing Company, in support of which this money is to be used?

## HAS THE STATE FAILED THE NURSES?

BY A NURSE LORD BURNHAM REFUSED TO SEE.

Recently I attended a meeting held by a certain section of the Labour Party. I have made no comprehensive study of their policy, but it did seem to me that, from such men as those who spoke on that platform, the anti-doles nurses would find an understanding and sympathy with their views that have not entered into the mind of the wealthy proprietor of the *Daily Telegraph*.

The subject of the address at the meeting was "Economics," but it was worthy of some better title, for I never listened to a finer discourse on ethics. I read last summer in the *B.J.N.* and the Burdett Press the papers on "Nursing Ethics" by two matrons, and I could not but wish that

they might have come into the clear atmosphere of this labour meeting to learn what ethics mean. The speaker was obviously a Trade Unionist of the moderate type, and had evidently very high and unselfish ideals in connection with his own particular movement. The whole of his address showed the large heartedness and breadth of view characteristic of one who has touched life in many places. In a simple and convincing way this man spoke to the conscience of us all, and those ethics of his, brought into the range of practical politics and daily life, were like a fresh wind after all the nauseating veneer of platitude and sentiment that has been used to cover up the abuses that have lurked in the administrative work connected with the nursing profession.

The address ended, the audience took full advantage of power to discuss it. I had no intention of speaking when I went into that hall but, added to the desire to express appreciation of the remarks to which I had listened, there was a reference made by one member of the audience to the position of nurses in the economic world, and in the course of some remarks I referred to the *Daily Telegraph* appeal and chanced to say, that the best type of nurse objected to this demand for shilling charity doles from the sailors and soldiers. In a moment there was a round of applause, in an instant these men had grasped the fact that a charity appeal was a poor substitute for justice, and was a menace to the economic position of the nurses. This applause was repeated when I pointed out in my next sentence that the State was responsible for nurses who had broken down owing to their work during the war.

#### THE DUTY OF THE STATE.

From the platform later, a gentleman stated that when he first read the appeal, he simply took it as a declaration from the *Daily Telegraph* that the State had failed in its responsibility to the nurses. It was disgraceful, said he, that our nurses should have to submit to this daily infamy in one of the leading newspapers, simply that the State might be relieved of its duty to them.

In the labour world we shall find that chivalry that will cause men to stop and consider what it means to the nurses to have this appeal promoted without proper reserve, men who will understand what a power for good or evil may lie in the hands of their employers who are to control the money rising from it. Among the members of the Labour Party we may find the support that will bring about a greater equity between the nurses and those who have run the nurse farms so advantageously for their own interests and their own social kudos, but with a mediæval indifference to the privations and sufferings of the workers. My suggestion is, madam, that we send a speaker whenever we can to Labour platforms, and perhaps the working man will get for the nurses what they have failed to get for themselves—some account of how the money, collected by the exploitation of their suffering has been spent.

## COLLEGE ETHICS.

The College of Nursing, Ltd., has issued the first number of a monthly magazine. The Editor, Miss Vera Collum, is *not* a trained nurse. The magazine is practically controlled by Sir Cooper Perry and Miss Cox Davies. In casting an eye over this publication we note that it is not calculated that it will interfere with the employers' "Nurses' Press," and the College lambs are advised to continue to support these unprofessional publications. They would be.

A block of the College Badge is published, *of course* leaving out the "Ltd.," which privilege the Board of Trade has never granted, but apparently there is no need for Sir Arthur Stanley to conform to the law.

A nomination sheet is issued on which the names of the present Council are published, the retiring members in large black type. Needless to say, every one of them is ready to apply for re-election, so that there is no chance of new blood, or further representation of the rank and file on the College Council. The nominated Council who seized power in 1916 and drafted rules and regulations which the members have to obey, are still almost to a Matron and man in office, and intend to remain so.

### THE STATE REGISTRATION FEE.

No definite information is given to the members *re* their State Registration Fee. "The Council of the College will intimate the conditions under which the members of the College who have been accepted for the State Register may obtain the return of the guinea they have contributed to the College for membership, or of so much of it as is required to pay the State Registration Fee."

The Council of the College has no further jurisdiction in the matter. To induce trained nurses to join the College it gave the following pledge in print:—

"If, therefore, you are on the College Register, you will, automatically and without further fee, be placed upon the State Register when the Nurses' Registration Bill is passed."

As the Government Act does not provide for the "automatic" registration of College members, or the members of any other nurses' organisation, each College member will have to apply for registration to the Statutory Authority, the General Nursing Council, set up in the Act. She has therefore a right to the guinea she has paid the College for this purpose.

No wonder the members of the College Council are grateful for shilling doles from Tommy and Jack, or from any other source. They are pledged to find a huge sum of money for the State Registration of their members, and presumably neither the signatories of the Company nor the Hon. Officials are anxious or willing to provide it.

## NATIONAL HEALTH WEEK.

The King and Queen have given their patronage to the "National Health Week," which is to be held throughout the country from May 2 to 8.

## APPOINTMENTS.

### MATRON.

**Tamworth Hospital.**—Miss Annie G. Hughes has been appointed Matron. She was trained at the Royal Infirmary, Oldham, and has been Sister at the Rochdale Infirmary, Sister at the Royal Eye Hospital, Manchester, and Assistant Matron at the District Hospital, Watford, Herts.

### NURSE MATRON.

**Isolation Hospital, Clifton.**—Miss Margaret A. Meadows has been appointed Nurse-Matron. She was trained at the Royal Infirmary, Chester, and in infectious nursing at the City Hospital, Liverpool, and has been Sister at the Bradford Children's Hospital, Night Sister at the Leasow Sanatorium, Cheshire, and Matron of the Convalescent Home, Partigate, Cheshire, the Military Hospital, Denby Dale, near Huddersfield, and the Alverley Hall Training School.

### ASSISTANT MATRON.

**Baldovan Institution for Feeble-minded Children, by Dundee.**—Miss J. A. Hannah has been appointed Assistant Matron. She was trained at the Cumberland Infirmary and has been Acting Matron in Military Hospitals for several years.

### SISTER.

**Maternity Home, Victoria Road, Leicester.**—Miss A. Cross has been appointed Sister. She was trained at the Portsmouth Infirmary, and Queen Charlotte's Lying-in Hospital and has been Sister at Shirley Warren Infirmary, Southampton.

### HEAD NURSE.

**Evesham Union.**—Miss Lilian Mount Stephens has been appointed Head Nurse. She was trained at the Hunslet Union Infirmary, Rothwell, Leeds.

### CHARGE NURSE (SISTER.)

**Hackney Union Infirmary, 230, High Street, Homerton, E. 9.**—The following have been appointed Sisters in the above Infirmary:—Miss Jessie Dorothy Jackson. She was trained at Derbyshire Royal Infirmary and has done Military Nursing at home and abroad as Surgical and Theatre Sister for five years.

Miss Ruby Trinnette Vickery. She was trained at the Lambeth Infirmary and received Midwifery training and was Staff Nurse at Queen Charlotte's Hospital, Marylebone Road, for a year, and Staff Nurse at the Grove Military Hospital for three years.

Miss Agnes Lloyd. She was trained at St. George's-in-the-East Infirmary, and has been Charge Nurse and Ward Sister under various Boards of Guardians from 1908 to the present time.

Miss Helen Mary Stebbings. She was trained at Guy's Hospital and since her training has held the position of Staff Nurse at that hospital.

### SUPERINTENDENT NURSE.

**York City and District Infirmary.**—Miss Nellie Barr has been appointed Superintendent Nurse. She was trained at the Hunslet Poor Law Infirmary, and has held the position of Charge Nurse under the York Board of Guardians.

## QUEEN ALEXANDRA'S MILITARY NURSING SERVICE FOR INDIA.

The following promotion has been made:—

Nursing Sister to be Senior Nursing Sister.—Miss E. J. Stonehouse (July 17th, 1919).

The following Lady Nurse has been permitted to resign the service:—Nursing Sister Miss P. M. C. Bosanquet (May 7th, 1919).

The following Lady Superintendent has been permitted to retire from the service:—Miss I. M. A. Lloyd (August 1st, 1919).

## RESIGNATIONS.

We regret to learn that Miss Harriet Barton has resigned the position of Central Sister in connection with the Ranyard Nurses (Ranyard House, 25, Russell Square, W.C. 1), on account of failing health. Miss Barton was trained at St. Bartholomew's Hospital and has been on the staff of the Ranyard Nurses for 24 years, where, says the *Ranyard Magazine*, she has given invaluable service. For the last seven years she has helped in all the organising work at the Centre, and in training candidates, as well as in visiting Nurses in their districts, and has been the greatest stand-by in the Nursing Branch during all the changes of recent years. Now she has gone to her home in Jersey to await a passage to South Africa, where her brother is living. Her many friends unite in hoping that the voyage and thorough change will greatly benefit her health.

## THE PASSING BELL.

Many nurses in Europe, America and Australia will be grieved to learn of the death of Miss Susan B. McGahey, formerly Matron of the Royal Prince Alfred Hospital, Sydney, and a past President of the International Council of Nurses. Miss McGahey, who was trained at the London Hospital, went to Australia in 1890, and a year later was appointed Matron of the Royal Prince Alfred Hospital, Sydney, an appointment she held for 13 years. She was one of the founders of the Australasian Trained Nurses' Association, and a Foundation Member of the International Council of Nurses. She was present at the International Congress of Nurses at Buffalo, U.S.A., in 1901, and succeeded to the Presidency in 1904. For some years she has been in failing health, but, says the *Australasian Nurses' Journal*, showed the same strength of will and determination throughout her illness which characterised her early life. She was laid to rest on the sunny hillside at Carlingford, after many years of pain and weariness.

## THANK-OFFERINGS FOR PEACE.

At a meeting of the Committee of Management of the Sheffield Queen Victoria District Nursing Association, held on the 20th inst., it was reported that the sum of £5,000 had been received as a thank-offering for peace from Mr. S. M. Johnson, of Endcliffe Court, Sheffield. In a letter accompanying the gift Mr. Johnson said he felt that he ought to give some tangible expression of his gratitude to Almighty God that the war had ended, and he had decided to make the gift to the Nursing Association, as he had long felt that the Association was doing a good work for the poorer people of Sheffield, and would probably do further good work if it had more funds.

As a thank-offering for peace an anonymous donor has given £25,000 to the hospital fund of the Manchester and Salford Medical Charities.

Recently Manchester and Liverpool Infirmarys and Guy's Hospital each received an anonymous gift of £20,000.

## COMING EVENT.

February 28th.—Association of Trained Nurses in Public Health Work. Conference on Mental Hygiene. Speaker, Miss I. Macdonald, 10, Orchard Street, Portman Square, W. 3.30 p.m. Tea 1s. Trained nurses cordially invited.

## BOOK OF THE WEEK.

## "THE GREAT HOUSE."\*

Mary Audley, the penniless daughter of an artist, stranded in Paris in the forties, and befriended by a Polish princess, met by chance in her salon an hitherto unknown kinsman, Lord Audley, who had just won a lawsuit, by which he got a bare title and an empty rent-roll.

Taking compassion on his young relative, who was a beautiful girl, with a striking personality, he undertook to placate her uncle (against whom he had just won his suit for the title) with whom Mary's father had been at variance.

The result of his mediation resulted in Mary shortly finding a home with her somewhat eccentric relative at the Gatehouse. The old man was still sore from his recent defeat—as Stubbs, the lawyer, put it, "he was mad on the point," and was constantly on the look-out for fresh evidence which would prove his claim. It was, therefore, anything but a calm atmosphere in the beautiful old house to which Mary found herself transplanted. To complicate matters, she was heiress to the title in the event of the present Lord Audley dying without children.

As the story is full of intrigue and plot, it is necessary to understand the foregoing explanation.

As may be imagined, intercourse between Lord Audley and old John Audley at the Gatehouse was not desired on either side, and until Mary took up her residence with the latter there had been no communication between the two.

The old man, in his hatred to his rival, feared that Lord Audley would see the advantage of marrying Mary and so making his claim doubly secure. But if Lord Audley had the title, old John had the money and the estates, and his object was that Peter Bassett, his chosen companion and secretary, should make that advantage impossible by marrying Mary himself.

Of the two, Peter Bassett was beyond doubt the better man, but Mary was naturally attracted by the greater physical attractions of Lord Audley.

The quiet weeks following her arrival seemed like Paradise, though few young people would have found the Gatehouse a lively abode.

The Great House, fallen into ruin, was the ancestral home of the Audleys, but its present owner lacked the means either to live there or to keep it in repair. It stood there, a monument of depression and failure. No one had lived there for three generations. At the house-warming to celebrate its rebuilding on a vast scale, the only son quarrelled with a guest and was killed. Bassett, describing it to Mary, says: "In the sunlight it is one of the most dreary things you can imagine; in the moonlight it is better, but unspeakably melancholy."

The old man, John Audley, was convinced that the title-deeds which would establish his own claims were somewhere concealed in this deserted home of the Audleys, and the old man and his

\* By Stanley Weyman. John Murray, London.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

*The*  
**Boots**  
*Chemists*

**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

man-servant were wont to steal out at night and gain entrance to the muniment room, where eventually they found the papers he sought. But the final effort caused the old man's death, and he was found dead in the room where he had discovered his claim to be valid. He had left the bulk of his money to Bassett, and Lord Audley found himself in the position of having lost his title and of being engaged to Mary, who, although she was now a peeress was practically as impecunious as himself, and was relieved to be free of him. Mary, realising the worthlessness of Lord Audley's character, and caring not a jot for her new honours, burns the precious papers that had cost the old man's life, and comes to kind, reliable Peter Bassett with no title and no lands, having with her own hand flung away her inheritance.

Mrs. Tofte, when she came in with the tray, came near to dropping it in her surprise. As she said afterwards: "The sight of them two as close as chives in a barrel—I declare you might have knocked me down with a straw! God bless 'em!"

A large portion of the book deals with the elections and riots in connection with the repeal of the Corn Laws, which will make it more interesting or tedious, according to the varied tastes of our readers.

H. H.

### OUTSIDE THE GATES.

*The Woman's Leader* and *The Common Cause*, now one and indivisible, is issued weekly at 2d. from Evelyn House, 62, Oxford Street, London, W. 1.

The numbers already issued are full of the right spirit, and we hope there is some woman on the staff who will take the trouble to study the Nursing Question, and do justice to a fine body of workers too long trampled under foot, and now passing through the degrading experience of being classed as paupers. Corroding charity patronage has apparently warped the self-respect of the controllers of the College of Nursing, Ltd. We hope the *Woman's Leader* will help us to drag the nurses out of this demoralising position. It has begun well by publishing the conjoint letter of protest against the *Daily Telegraph* Doles for Nurses Fund—a letter boycotted by every daily newspaper in London excepting the *Morning Post*.

*The Woman's Leader* will no doubt help to break this method of misleading the public.

### FRIENDSHIP.

What is friendship?

Just the giving up of heart to heart—

A kindness which shuns no pain,

A thing apart from any other sentiment,

Something which enriches—makes new again

The strength that's weaken'd, and restores

The tired soul to pride of self, and love of good.

And gives to thirsty one

The sound of summer rain

Pattering thro' thick-leaved trees in an English wood,  
A wondrous thing, Heaven-sent—is Friendship.

M. D.

The above charming lines are written by a trained nurse.

### LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

#### THE SERBIAN RELIEF FUND.

To the Editor of THE BRITISH JOURNAL OF NURSING..

DEAR MADAM, With reference to the paragraph in your issue of the 14th inst., about the work of the American Red Cross in Serbia, we feel it right to state that though the American Serbian Relief Committee are opening an orphanage for Serbian children at Chacak, this does not, fortunately, represent the whole of the work which is being done in Central Serbia for children. The Serbian Relief Fund has an orphanage of fifty beds at Nish, and a home for young boys near Belgrade, where trades are taught; it has also a hospital of 200 beds at Nish, another at Prokuplje of over fifty beds, and a sanatorium for some fifty tubercular patients in a good locality. In all these institutions children are treated as in and out patients; moreover, the Serbian Relief Fund has village dispensaries working in eight or ten different centres in country districts. Each dispensary is in charge of a trained nurse, assisted by a relief worker, and here hundreds of children are being treated. These dispensaries have been working in Serbia ever since the re-occupation in 1918. During the time of great distress soup kitchens were attached to the dispensaries, and thousands of garments were distributed. Our Director, Major Hardwicke, states that though at one time we were feeding between 7,000 and 10,000 children a month, food conditions are now better, but the need for work among children will continue for some years. The Serbian Relief Fund has a staff of over 100 workers now in Serbia, many of whom have been working for the Serbians since 1914. It includes nine medical men and women, some forty trained nurses, besides sanitary inspectors and workers experienced in child welfare. There are also three orphanages financed privately, which are in charge of English ladies and a joint committee in Belgrade, consisting of members of all Societies now working in Serbia, is trying to co-ordinate child welfare work all over the country, by supplying funds and workers in places which have not yet had special help for children. This joint committee and the Serbian Relief Fund would welcome funds wherever to extend the work which is terribly needed throughout all the country.

I remain, Yours faithfully,

ELLINOR F. B. GROGAN,

Chairman of the Staffs Sub-Committee.

5, Cromwell Road, S.W. 7.

[We welcome Lady Grogan's report of the excellent work being done by the Serbian Relief Fund in Serbia, and hope there may be a constant increase of funds, so that it may be extended and



maintained. This nation proved itself heroic in the highest degree during its persecution by the Central Powers, and it is well for the world that such a people should exist and multiply.—ED.]

### AWARDS FOR NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—In the *Morning Post* (February 12th), under the above heading, was a copy of a letter from Mr. Winston Churchill, stating in a reply to an enquiry from an M.P., that—

1. All Nursing Sisters, on being demobilised, received an official letter conveying thanks for their services.

2. That, as far as he is aware, there are no cases in which nurses serving abroad, who have been recommended for the R.R.C. by the G.O.C., who have not received it.

Our Secretary of State for War has certainly been made the butt for one of his own so-called "terminological inexactitudes." In my case, after four years and seven months' continuous service with no leave during 1915 or 1916, I was demobilised by my own request, with merely a W.O. wire, "Authority is granted for your release."

My gratuity cheque was sent in an envelope, written in pencil, with no communication.

I was twice recommended by the O.C. of my hospital for the First Class R.R.C.; but such recommendations have a long long trail before they reach the G.O.C., and my case probably never left the clerk's hands in the A.D.M.S. office.

Strange things happen. It would be interesting to know why the W.O. letter calling for further recommendations in October, 1918, was only sent to two hospitals in the Cork Command, as there were only two awards to be made.

This fact was acknowledged in writing.

I shall be glad to know of those trained nurses who have been demobilised without the said letter, if they care to send their names to—The Secretary, Professional Union Trained Nurses, 17, Evelyn House, 62, Oxford Street, W., stating the hospitals at which they served.

LATE SISTER, Q.A.I.M.N.S.R.

### PROBLEMATICAL BENEFITS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—In the report of my address at the P.U.T.N. Meeting in Glasgow, a strange mistake has been made with regard to what I said *re* the Registration Acts.

It is stated that I pointed out that we had secured State Registration "and its resulting benefits."

As I have entirely failed to find any resulting benefits, it must be impossible for me to point them out to others.

What I did say, was that the Acts *might* prove a benefit to the public, but that nurses wanted *Laws that were self-administered, and that they should not be content to leave the management of*

*their affairs in the hands of the Minister of Health.*

Believe me, yours faithfully,

CHRISTIAN H. MCARA.

Scottish Nurses Club.

205, Bath Street, Glasgow.

[The Editor of this Journal devoted eleven columns to the report of the P.U.T.N. Meeting at Glasgow, so that the new trade union movement amongst nurses should have an ample report and fair play; even then it was impossible to report every speech verbatim. The most important and admirable address, that of Councillor Rosslyn Mitchell, appeared in full, and we advise trained nurses to read it carefully. We sympathise with Scottish nurses in their keen disappointment in not securing a United Kingdom's Nurses' Registration Act; but that is no reason why very great benefits should not accrue through the Act for Scotland, if the nurses unite to secure them, and co-operate with English and Irish nurses.—ED.]

### NURSES ON STRIKE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—If there is no mistake in the report in your Journal that the nurses of Carrickmacross Fever and General Hospital have come out on strike, and that the patients are without attendance, I hope the nurses who are in Trade Unions will take some action to uphold the honour of their profession, and express themselves about striking against innocent patients. It is almost unbelievable that a real nurse could leave her patient.

I hope you will print this letter from me as I have spoken upon the platform of the Professional Union of Trained Nurses. Nothing will help their organisation so much as taking a nurse's view in this case, and nothing will hinder them so much as taking a wrong line.

A Trade Union of Nurses should be the quintessence of all that nursing means at its best, and should uphold its high ethics.

Yours faithfully,

HELEN G. KLAASSEN.

February 21st, 1920.

[There were several strikes of nurses in Mental Hospitals in Ireland last year, and there is no mistake in our report to which Miss Klaassen refers. The nursing conditions in many Irish hospitals are in urgent need of improvement.—ED.]

We regret to have to hold over many "Kernels."

### OUR PRIZE COMPETITIONS.

We regret we cannot award a prize this week.

#### QUESTIONS.

February 28th.—How would you care for the mouth, the hair, and the nails of a helpless patient?

March 6th.—In what cases may profuse sweating occur as a prominent symptom?

What are the causes of this sweating, and what its special nursing?

Read the Back Page of the Cover.

# The Midwife.

## THE CENTRAL MIDWIVES BOARD. MONTHLY MEETING.

A meeting of the Central Midwives Board was held at 1, Queen Anne's Gate Buildings, S.W., on February 19th. The correspondence included letters notifying the re-election of the following members of the Board for one year from April 1st. Sir Francis Champneys, Bart., M.D., by the Royal College of Physicians, Mr. Walter Spencer Anderson Griffith, M.D., F.C.R.P., F.R.C.S., by the Royal College of Surgeons, and Mr. Charles Sangster, M.R.C.S., L.S.A., by the Society of Apothecaries.

### PENAL CASES.

A meeting of the Central Midwives Board to consider charges against certified midwives was held at 1, Queen Anne's Gate Buildings, on Thursday, February 19th, with the following results:

*Struck off the Roll and Certificate Cancelled.*—Midwife Elizabeth S. R. Rimmer (No. 25), whose case had been adjourned for judgment on November 13th; Mary Jane Turner (No. 3639).

*Sentence Postponed.*—In the cases of Midwives Ada Allen (No. 39286), Anne Davies (No. 11083) and Annie Maria Hampshire (No. 37421) sentence was deferred, and a report asked for from the Local Supervising Authority in three and six months' time.

The following is the form now read by the Secretary in reference to such cases:—

"The Board finds charges . . . proved. It does not consider that the offences proved can be adequately dealt with by censure or caution. But before proceeding to remove your name from the Roll of Midwives and to cancel your Certificate, and in order to give you an opportunity of proving amendment, it has decided to postpone sentence and to ask for a report from the Local Supervising Authority at the end of three months, and also at the end of six months, on your conduct and methods of practice, especially with regard to the offences of which you have been convicted.

"If at the end of the first of these periods a favourable report is received, sentence will be postponed until the second report is received.

"If at the end of the second of these periods no favourable report is received, your name will forthwith be removed from the Roll and your Certificate cancelled.

"Unless at the end of the first of these periods a favourable report is received your name will forthwith be removed from the Roll and your Certificate cancelled."

*Applications for Restoration of Names to Roll refused.*—Frances Louisa Bracey (late No. 31514) and Theresa Jones (late No. 6478).

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

The Examination of the Central Midwives Board for Scotland, held simultaneously on February 2nd and 3rd in Edinburgh, Glasgow, and Dundee, has concluded with the following results:—

### LIST OF SUCCESSFUL CANDIDATES.

#### EDINBURGH.

Miss Martha Aitken, Miss Susan R. Angus, Miss Jessie Bath, Miss Dorothy E. H. Bell, Miss Ethel S. Bower, Miss Ethel C. Briggs, Miss Janet Bruce, Miss Ethel M. Cardy, Miss Annie Clark, Miss Margaret Forrest, Miss Beryl M. Herford, Miss Georgina Hobb, Miss Elizabeth B. Hunter, Miss Annie M. Hutcheon, Miss Robina E. Laidlaw, Mrs. Williamina Leslie, Miss Florence M. Luck, Miss Margaret N. Lumsden, Miss Flora R. Macdonald, Miss Maggie Mackay, Miss Christina E. MacKenzie, Miss Alice Manuel, Miss Jessie Muir, Mrs. Sarah J. Muir, Miss Margaret W. Muncie, Miss Jessie D. Murdoch, Miss Dorothy H. M. Paterson, Miss Margaret H. Purves, Miss Mary N. K. Rae, Miss Annie M. Ramsay, Miss Isabella M. Scott.

#### GLASGOW.

Miss Hannah M. Aikman, Miss Frances M. Armstrong, Mrs. Agnes H. Arthur, Mrs. Elizabeth Bain, Miss Violet H. Bain, Miss Helen R. Barker, Miss Jane Baxter, Miss Margaret C. Boyd, Miss Constance J. O. Brodie, Mrs. Agnes P. Cairns, Miss Catherine Cameron, Miss Violet H. Cameron, Miss Margaret Campbell, Mrs. Elizabeth F. Clelland, Miss Elizabeth Collins, Miss Marion C. Crawford, Miss Fannie G. Culloden, Miss Annie Donald, Miss Elizabeth A. Donnachie, Miss Edith Duggan, Miss Mary N. Frederick, Miss Mary Frame, Miss Mary C. M. Fullarton, Miss Lillias H. Grant, Mrs. Margaret C. Hart, Miss Jeanie Hunter, Miss Oliva R. Jackson, Miss Annie C. Johnstone, Miss Paulina M. Kane, Miss Mary Kennedy, Miss Margaret D. Kerr, Mrs. Agnes Kininmouth, Miss Christina J. Kinloch, Miss Alice M. Lachlan, Miss Annie P. M. Laing, Mrs. Elizabeth M. Mackenzie, Miss Lily C. Mackenzie, Miss Agnes M. Malcolm, Miss Anabel Menzies, Miss Margaret Morrison, Miss Elizabeth Neil, Miss Elizabeth A. Parker, Miss Annie B. Scott, Miss Agnes O. Simpson, Miss Elizabeth D. Simson, Miss Annie Smith, Miss Elsie Staning, Miss Mary Stevenson, Miss Mary W. Stevenson, Mrs. Mary H. Stuart, Miss Williamina Stuart, Miss Margaret L. M. Swan, Miss J. S. Templeton, Mrs. E. M. Williams, Mrs. A. M. B. Young.

#### DUNDEE.

Miss Elizabeth Downie, Miss Davina Dryden, Miss Jane Duncan, Mrs. Wilhelmina Killemyer, Miss Frances M. Macdonald, Miss Alice MacKilligan, Miss Helen A. McLeish, Miss Margaret H. Mears, Miss Mary W. Reid, Miss J. M. Tennant.

# THE BRITISH JOURNAL OF NURSING

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Vol. LXIV

## EDITORIAL.

### THE NURSING CARE OF THE INSANE.

Professor G. M. Robertson, M.D., who has for many years been a leader in Scotland in regard to the medical treatment and nursing care of the insane, presented a most interesting Report at the recent Annual Meeting (at which Lord Provost J. W. Chesser presided) of the Royal Edinburgh Asylum for the Insane, of which he is the Physician-Superintendent. In passing we take this opportunity of congratulating Professor Robertson on the high and well-merited honour of having been appointed to the first Chair of Psychiatry in Scotland.

Professor Robertson has steadfastly, and constantly, claimed for the insane the right to the care of women nurses, and has placed in charge of wards in mental hospitals for which he has been responsible, in Stirling and Edinburgh, women trained in general nursing, as well as in that of mental diseases—a policy which has been amply justified in the result. He has had the vision enabling him to realise that nursing, whether of the sane or insane, is pre-eminently the work of women; that the goal of those responsible for the insane should not be simply to incarcerate them in charge of keepers to prevent them from damaging themselves and others, but to place them in an environment which shall be remedial, and which shall inspire them with the hope of ultimate recovery. In such an environment mental and moral influence play a most important part, and, unquestionably, though there are men who exercise such an influence, in the main women are in this connection more effective instruments.

In the course of his Report the Physician-Superintendent referred to the negotiations of the Governing Body of the Asylum with their staff, the question of the recognition of the

Asylum Workers' Union, and the policy of that Union to do away with the employment of women nurses on the male side of the hospital. In forcible terms he stated the case for the continuance of the employment of women nurses.

We are of opinion that the patients owe Professor Robertson a deep debt of gratitude for his insistence on this point. Scotland has always been in the van in regard to the organisation of the nursing of the insane, and Professor Robertson foremost amongst those who claim for them, as for the physically ill, the care of highly trained women nurses.

The nurses also are indebted to him for opening up to them a branch of work which, as nursing goes, is relatively well paid, and, to those who have an aptitude for it, is exceedingly interesting, both from its humanitarian and scientific standpoints.

We strongly endorse Professor Robertson's policy, which is gradually becoming accepted, not only north but south of the Tweed.

In regard to the strain of the war, Professor Robertson said everyone imagined that the end—the successful end—of this strain would be followed by an emotional rebound of an opposite kind. The strain had lasted too long for such a rebound to be enjoyed, except by the young. Some people had broken down since the war came to an end. Many, as a solace to their feelings, had taken an interest in spiritualism. He reiterated a warning he had previously given on the danger of neurotic persons engaging in practical enquiries of a spiritualistic nature.

Another after effect of the war had been to cause not only those seeking consolation, but the medical profession also, to engage in a closer study of the mind. This interest had arisen from such a demonstration as had never before been given in the history of the world of the influence of the mind in creating symptoms, and of its power to relieve them.

## OUR PRIZE COMPETITION.

### HOW WOULD YOU CARE FOR THE MOUTH, THE HAIR, AND THE NAILS, OF A HELPLESS PATIENT?

We have pleasure in awarding the prize this week to Miss Sarah Ann Cross, Edmonton Infirmary, London, N. 18.

#### PRIZE PAPER.

When a patient is in bed the state of the mouth should be observed. A frequent cause of the decay of teeth is neglect during acute illness.

The mouth should be examined to see if there is any pain or heat, are there any decayed or unclean teeth, the condition of the gums—are they normal red or very pale, swollen, bleeding, or rather blue? The condition of the tongue should be noted—is it coated? If so, light or grey, dry and brown, red, or the so-called strawberry tongue, or does it tremble?

The more severe the illness, as a rule, the higher the temperature, and the greater the necessity of giving careful attention to the mouth.

A neglected mouth is often shown by the accumulation of a thick, dry coat on the tongue, and thick, sticky offensive masses, called *sordes*, on the lips, gums, and between the teeth. It is said that the condition of the patient's mouth is an indication of the capability of the nurse.

If the patient is well enough to brush his teeth, or to have them brushed, nothing is more refreshing in illness than a clean mouth and well brushed teeth.

The mouth should be rinsed several times a day with warm water, and, if preferred, a little common salt can be added, or tincture of myrrh or eau-de-Cologne, which stimulates the secretions.

Frequent swabbing of the teeth, gums and tongue with a piece of cotton material held in a pair of forceps and saturated with an alkaline solution, such as glycerine and borax, will greatly add to the comfort and welfare of the patient. If the lips are sore and bleeding, powdered boric acid may greatly relieve the condition.

If the patient sleeps with his mouth open, the tongue should be moistened frequently with a solution of glycerine and water on a piece of cotton material held with a pair of forceps. All swabs used for cleaning the mouth must be burnt.

The hair must be brushed and combed every day, twice a day if the condition of the patient will allow, and be braided in two braids, so

that the patient does not lie on them. If the hair is matted through neglect, it must be gently combed a little at a time during the day, and the next day. It will be found easier if the hair is combed upward, starting at the ends first. If vermin are in the hair there are many preparations which will quickly exterminate them. Carbolic oil, 1 to 40, I have found very successful for verminous heads. If it is rubbed well into the hair, and a compress of old linen and jaconette applied, and bandaged on and left until the next day, all the vermin will be found to be dead. The head is then washed with warm water, soda and soap, and well rinsed. After thoroughly drying, apply hot vinegar to the nits, which will loosen them from the hair, so that they can be brushed off or combed off with a dust comb.

The nails must be kept clean and trimmed. Dirty nails in infectious diseases, such as typhoid fever, have been known to re-infect the patient. The nails, when trimmed, must not be left uneven; a little rubbing with a nail file will greatly add to the patient's comfort.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss S. Crone, Miss Jean M. Scott, Miss M. A. Jacomb-Hood, Miss E. O. Walford, Miss M. Barnes, Miss F. Thomasson.

Miss Crone writes:—"Micro-organisms flourish in the warm moisture of the mouth, and if allowed to multiply to any extent produce 'toxins,' which cause gastric and other troubles. Assuming that the patient is sensible and able to hold fluid in his mouth, a mouth wash of peroxide of hydrogen, vols. 20, one ounce to one pint of water, could be given on waking in the morning before giving nourishment. This is easily managed by giving the patient a small quantity in the mouth at one time, protecting the neck and chest by a towel, and turning the patient's head to one side and allowing the fluid to return into a receiver (a small soap dish would do); this could be continued until the lotion is returned clear, and if the patient likes, could be followed with a little plain water or boracic (one drachm to one pint)."

Miss Jean M. Scott writes:—"When the nails are not properly cared for they are frequently the seat of inflammation and sepsis. This inflammation begins at the side of the finger by the nail, and a whitlow may be the result."

#### QUESTION FOR NEXT WEEK.

In what cases may profuse sweating occur as a prominent symptom? What are the causes of this sweating, and what its special nursing?

## NURSING ECHOES.

The Nurses' Missionary League holds a Quiet Day for Prayer and Meditation on Wednesday, March 10th, by kind permission of the Chaplain, at the Chapel Royal, Savoy, Savoy Street, Strand. It will be conducted by the Chaplain, the Rev. Hugh B. Chapman. 10.45-12.15 a.m.—Celebration of Holy Communion, and Meditation by the Chaplain. Subject: "The Sacrament and the Ward." Admission of new members. 3-4.15 p.m.—Evensong, with Meditation by the Chaplain. Subject: "The Dilemma of Love and Holiness." Admission of new members. 7.30-8.30.—Prayers, with Meditation by the Chaplain. Subject: "The Washing of Feet." The Church is open for Prayer and Meditation throughout the day.

The appointment of Assistant Matron at St. Bartholomew's Hospital is vacant, and the salary at which the post is advertised commences at £110, rising to £150, with board, residence, uniform and washing, which in these days must be calculated at not less than £120 per annum. The hospital contains 759 beds, and the nursing staff averages about 290, all ranks.

The salaries of the Assistant Matrons in the following hospitals range as follows:—St. Thomas, £100 to £150; King's College, £80 to £100, teaching fee £21; St. George's, £100 to £120; Middlesex, £85 to £150; Royal Free, £100 to £120; St. Mary's, £85; Westminster, £60 to £80.

The Chelsea Hospital for Women has received £220 towards the building of the new Nurses' Home from a Concert and Sale of Work organised by the Matron and Nursing Staff of the Hospital. A sum of £7,000 is now in hand.

The Nurses Resettlement Department of the Ministry of Labour has removed from Curzon Street to 99, Queen's Gate, S.W. 7.

The Annual Meeting of the Central Council for District Nursing in London, to which we referred last week, was held in the Board Room of the Metropolitan Asylums Board on February 26th, Sir William Collins presiding. The Report was presented by Mr. E. B. Turner, F.R.C.S., Hon. Secretary.

In reference to the paragraph in the Report stating that in view of announcements in the

press that some of the surplus funds of the British Red Cross Society were to be devoted to nursing, and that £10,000 would be entrusted to the Council for distribution, consideration being specially given to the work done on behalf of the ex-service men, the Rev. G. B. Doughty (Association of Poor Law Unions) asked whether the money was to be ear-marked for this purpose. It would be extraordinarily difficult for the Executive to carry out that aspiration with ear-marked money. The Council was for General District Nursing.

In reference to a contribution of £500 from the Insurance Committee of the County of London, he inquired also whether it was right or reasonable to accept this money, which was for the nursing of insured persons, if they could not fulfil their obligations.

Mr. Turner, replying, said that how the £10,000 was to be used would be one of the first things the Executive would have to consider. In regard to the £500, he hoped that the Approved Societies would co-operate with the Council, and that this would be the beginning of a great deal more. Nurses working under the Council would, however, nurse all cases indiscriminately, and the money would go to the general funds.

In reply to another question from Mr. Doughty, as to whether the conditions of enrolment on the Emergency Nurses' Panel would cut out the V.A.D.'s, Miss Puxley replied that they must all be three years' trained nurses, preferably with district training also.

Miss S. M. Marsters, Chairman of the Executive Committee of the Queen's Nurses' Benevolent Fund, which is organised on a contributory basis, presided at Sheffield, on February 25th, at a meeting convened by Miss Hancox, Superintendent of the Sheffield District Nurses' Association. No less than ninety Queen's Nurses accepted the invitation to be present, and Miss Marsters explained the object of the Fund, and urged Queen's Nurses to join.

Mr. G. B. Wood, Chairman of the Association, while expressing the opinion that no local Queen's Nurse would ever be allowed to suffer from poverty, supported the principle of self-help, and recommended the nurses present to consider the wisdom of starting a local branch. It was decided that this should be done, and Miss Holden was appointed Hon. Secretary, and Miss Grey, Treasurer. Miss Hancox afterwards entertained those present to tea, when the project was further discussed informally.

The Registrar of the Infant Welfare Workers' Employment Bureau is writing to matrons asking them to recommend young nurses for Infant Welfare Work, as they are often asked to find nurses for Homes for both sick and well babies, and they are anxious to get nurses to complete their training for it.

We have gone through the salaries for the various grades of workers required, and do not think that until they are raised that the supply is likely to meet the demand, especially as the candidates must pay for their training as follows:—The Battersea Polytechnic Course, £14 per annum; the Bedford College Course, 15 guineas; and the King's College Course, 30 guineas per annum.

The C.M.B. certificate now needs six months' training, and costs from £18 to £35. Many nurses pay these fees. Yet it is claimed by those who are attempting to organise the Nursing Profession on charity doles that a trained nurse cannot afford to pay 2 guineas for registration and legal status.

Under the chairmanship of Councillor F. J. Oakley, convener of Public Health, it was agreed to form a Newport Corps of Voluntary Nurses to undertake whole-day, half-day, and night nursing, and also domestic help.

What have the trained nurses in the district to say to this scheme? Presumably neither trained nurses nor patients are to be consulted. If there are a number of unemployed women at Newport, let them be efficiently trained as nurses or domestics, and thus qualify for responsibilities they are apparently prepared to assume without it.

We are glad to note that at Dr. Falkiner's lecture on "The Nurse and the State," in Dublin, the majority of the speakers deprecated campaigns of begging, such as that promoted by the College of Nursing, Ltd., and we hope these sensible people will encourage Irish nurses to stand out against charity doles.

Some of the hospitals in Ontario are owned by the Government, and in these hospitals there is a shortage of nurses. Some two or three weeks ago General Manley Sims, the Agent-General for the Province, received a communication from his Government asking if he could do anything towards filling up the vacancies. "The Government," said General Manley Sims to a representative of the *Canadian Gazette*, "required 150 young women, between the ages of 20 and 33, with good references,

who would be willing to sign on for three years as probationers. The salary was to be \$25 a month for the first year, \$30 a month for the second year, and \$35 for the third, with food and lodging, washing and uniform. The Government is advancing, where necessary, transportation charges, which are to be repaid by instalments. We have met with a wonderful response in the north of Scotland. A party of 50 young women has been organised in less than a fortnight, and they will sail for Canada on March 5th. A second party will sail a little later, and a third will follow. We are receiving applications from very fine types of young women. Many of them have been war workers, who do not want to remain at home doing nothing. The Women's Emigration Society, the Women's Legion, and Mrs. Yeamens, of the Canadian Emigration Office, have sent us many young women who are eager to take up the work. Fortunately, I have also been able to take advantage of the help of a lady now in this country who has herself qualified as a nurse in Ontario, and in whom great confidence is felt. This lady has interviewed a number of the applicants, and has passed on those who were suitable to Mrs. Yeamans to be passed according to the Canadian Government regulations. The double examination ought to ensure us getting the right type of women. As a matter of fact, those who have been passed as suitable seem to be fine samples of Old Country young women."

One of the interesting topics to be discussed at the Biennial Convention of the American Nurses' Association at Atlanta, U.S.A., in April next, will be "industrial nursing." The chairman of the Committee of Industrial Nursing of the National Organisation for Public Health Nursing (Miss Florence Wright) sends notice, through the *American Journal of Nursing*, to her colleagues interested in this special branch, of the intention of that body to form a section of Industrial Nursing, the object of which is the formulation and maintenance of high standards for nursing service in industry. One of the things to be discussed is the necessity for the development of opportunities for special training in this department of work, in large centres. In this, as in all special branches of nursing, those who take it up without preparation have found the need for special instruction, closer co-operation, and broader opportunities for their department of work.

We also have our problems in industrial nursing, amongst them the efficient nursing of insured persons, both preventive and curative.



## THE NURSING PAGEANT.

In these days, when everything is so costly, the presentation of the Nursing Pageant means a much greater expenditure than in 1911. Nevertheless, it appears to us a psychological moment to present it, for various reasons. (1) Because even yet many nurses do not realise that the Acts of Parliament have constituted them into an honourable profession, and that it is therefore a great occasion for rejoicing and gratitude. (2) Because for two and a half years trained nurses have, through the Council of the College of Nursing, Ltd., been held up daily in leading organs in the press—and in the employers' commercial nurses' papers—in *forma pauperis*, and, with the exception of this Journal, their protests have been ignored. Nothing could have been more injurious to the *amour propre* of the Nursing Profession than these unjustifiable methods of appeal—or depreciated their work and status more deplorably in the opinion of the public generally. No wonder the Nursing Profession is the only profession which does not qualify for membership of the Lyceum Club!

This beautiful Pageant, showing the evolution of trained Nursing—from ancient times until this day—proves how noble and honourable has been our work through the ages, and will, we feel sure, be as balm to the wounded spirit of self-respecting nurses when they take part in it, and prove to the public not only their value in raising the standard of national health, but the respect and devotion in which they hold their fine vocation.

Alas! no doubt many of our friends at a distance will be unable to be present at the Pageant on April 15th, but that is no reason why they should not help to make it a success. To those who sympathise with this effort to show "Our Nurses" as they are—working women well worthy of respect (not as the downtrodden, semi-trained, cadging drudges held up for shilling doles by the *Daily Telegraph*)—we appeal for support. We shall be pleased to receive and acknowledge subscriptions from our readers if sent to the Editor, 20, Upper Wimpole Street, London, W. 1, for the purpose of the Pageant expenses. Should the sale of tickets leave a surplus it is to be handed to Her Royal Highness Princess Christian, the Patroness of the Pageant, for the "Nurses' Own Club," which is being organised by the Royal British Nurses' Association, and in the success of which Her Royal Highness takes a deep interest.

## HONOURS FOR NURSES.

## CONFERRED BY THE KING.

The King conferred decorations as follows at Buckingham Palace, on February 25th:—

## THE ROYAL RED CROSS (FIRST CLASS).

Miss Annice Gray, Queen Alexandra's Imperial Military Nursing Service Reserve.

## THE ROYAL RED CROSS (SECOND CLASS).

Queen Alexandra's Imperial Military Nursing Service Reserve.—Mary Mrs. Helm, Miss Edith Mason, Miss Florence Parsons, Miss Eliza Thomas, Miss Amy Waterman, and Miss Margaret Wolsey.

Territorial Force Nursing Reserve.—Miss Mary Bunting, Miss Annie Knox, Miss Ann Smith, and Miss Boone Turner.

Civil Nursing Service.—Miss Beatrice Short.

Civil and War Hospitals.—Miss Bertha Collins, Mary Mrs. Noel-Jones, Miss Sarah Williamson, and Miss Margaret Woodward.

Voluntary Aid Detachment.—Miss Faith Allen, Miss Edith Macarthy, Ethel Mrs. Ramsbotham, and Annie Mrs. Thomas.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service) was also received by Her Majesty.

At an Investiture, on February 27th, at Buckingham Palace, the following decorations were conferred by the King:—

## BAR TO THE ROYAL RED CROSS.

Miss Edith McCall-Anderson.

## THE ROYAL RED CROSS (FIRST CLASS).

Miss Janey Gray (Territorial Force Nursing Service) and Miss Kate Worger (Territorial Force Nursing Service).

## THE ROYAL RED CROSS (SECOND CLASS).

Queen Alexandra's Imperial Military Nursing Service.—Miss Mary Humphrey-Jones.

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Jessie Blyth, Miss Jessie Cumming, Miss Adelaide Eves, Miss Jessie Hoskins, Miss Anne Lee and Miss Dorothy Taylor.

Territorial Force Nursing Service.—Miss Maude Gibson, Miss Theresa Hayes, Miss Marion Hearn, Miss Maud Hall-Houghton, Miss Rowena Lush, Miss Agnes Watson and Miss Sarah Youngman.

British Red Cross Society.—Mrs. Mabel Whyte, Mrs. Cecilia Williamson and Miss Jessie Wilson.

Civil and War Hospitals.—Miss Sybil Grey and Miss Kate Haywood.

Voluntary Aid Detachment.—Mrs. Julia Warde-Aldam, Miss Winifred Clark, The Viscountess Ednam, Miss Hilda Lyster, Miss Dorothy Taylor and Miss Marjorie Williams.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Many friends will learn with pleasure that the Bar to the Royal Red Cross has been awarded to Miss E. A. Montgomery Wilson, R.R.C., Matron of King Edward VII's Hospital, Cardiff; and Principal Matron, Third Western Territorial Hospital, T.F.N.S.

The King has been pleased to award the Royal Red Cross to the following ladies in recognition of their valuable nursing services in connection with the war :—

**ROYAL RED CROSS (SECOND CLASS).**

Miss V. J. M. Abel, Senior Sister, Queen Mary's Hosp., Roehampton; Miss P. M. Allen, Sister, Q.A.I.M.N.S.R., S. African Mil. Hosp., Richmond; Miss M. S. Allison, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Ripon

Miss A. M. Baker, Staff Nurse, Q.A.I.M.N.S.R., Mil. Hosp., Grantham; Miss E. Barry, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Colchester; the Hon. G. E. Best, Asst. Matron, St. Thomas's Hosp., London; Miss B. Bezar, Sister, T.F.N.S., Somerville Sect., 3rd Southern Gen. Hosp., Oxford; Miss E. Bigg, V.A.D., Probationer B.R.C.S., 4th Lond. Gen. Hosp., Denmark Hill; Miss M. Binks, Sister-in-Charge, Nell Lane Mil. Hosp., W. Didsbury, Manchester; Miss S. Blacklock, Sister, Royal Victoria Infirmary, Newcastle-on-Tyne; Miss M. Bowe, Sister, Q.A.I.M.N.S.R., The Mil. Hosp., Curragh; Miss E. D. Bowes, Matron, Grimsby Corporation Isolation Hosp., Scartho, Grimsby; Miss M. Breeze, Nursing Sister, St. Bartholomew's Hosp., Rochester; Miss A. Brown, Sister, Q.A.I.M.N.S.R., Queen Mary's Mil. Hosp., Whalley; Miss A. I. Brown, Sister, Northumberland War Hosp., Gosforth, Newcastle-on-Tyne; Miss C. Browne, Matron, Royal Victoria Hosp., Folkestone; Miss M. Burkhill, Sister-in-Charge, T.F.N.S., Nell Lane Mil. Hosp., W. Didsbury, Manchester.

Miss F. Cameron, Staff Nurse, Q.A.I.M.N.S.R., Queen Mary's Mil. Hosp., Whalley; Miss M. Cardoza, Asst. Nurse, attd. T.F.N.S., 1st Lond. General Hosp., Camberwell; Miss L. R. Caw, Nurse, Mil. Hosp., Stirling; Miss A. D. Christian, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Tidworth; Miss E. Cole, Nurse, Spec. Mil. Surg. Hosp., Edmonton; Miss A. A. J. Coles, A Matron, T.F.N.S., Redmaids Sect. of Southmead Spec. Mil. Surg. Hosp., Bristol; Miss M. Collins, Ward Sister, Alder Hey Spec. Mil. Surg. Hosp., W. Derby, Liverpool; Miss E. M. Collins, Sister, Q.A.I.M.N.S.R., Royal Victoria Hosp., Netley; Miss W. G. Coombs, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Catterick Camp, Yorks.

Miss A. Daly, Asst. Nurse, Reading War Hosp., Miss E. M. Davies, Sister, Q.A.I.M.N.S., Wharncliffe War Hosp., Sheffield; Miss M. De Mulder, Sister, T.F.N.S., 2nd Northern Gen. Hosp., Becketts Park, Leeds; Miss K. Denning, Sister, T.F.N.S., 1st Lond. Gen. Hosp., Camberwell; Miss F. G. P. de Stourdzazrinyi, Sister, Q.A.I.M.N.S., Mil. Hosp., Catterick Camp, Yorks; Miss N. Duffett, Sister, T.F.N.S., 1st Lond. Gen. Hosp., Camberwell.

Miss F. Eggins, Matron, District Hosp., Skipton.

Miss A. Fraser, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Lichfield; Miss D. Fraser, Sister, Q.A.I.M.N.S.R., Cambridge Hosp., Aldershot.

Miss A. George, Asst. Matron, Spec. Mil. Surgical Hosp., Edmonton; Miss E. A. Gillis, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Grantham; Miss A. Gourlay, Sister, T.F.N.S., 2nd Scottish Gen. Hosp., Craigleith, Edinburgh; Miss G. B. S. Gwatkin, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Devonport.

(To be continued.)

**CONFERRED BY THE KING OF SERBIA.**

The following decoration has been conferred by the King of Serbia, and the King has given unrestricted permission to wear it at all times.

**THE SAMARITAN CROSS.**

Sister Mabel Duffy, T.F.N.S.

**THANKS FROM QUEEN'S HOSPITAL, BIRMINGHAM, NURSES' LEAGUE.**

The following letter has been received from the Queen's Hospital Nurses' League, Birmingham, which is affiliated to the National Council of Trained Nurses :—

DEAR MRS. BEDFORD FENWICK,—At a meeting of the Queen's Hospital Nurses' League held on February 24th, the following resolution was passed, viz.: "That this meeting wishes to thank the pioneers of State Registration for all their efforts on behalf of nurses in the cause for State Registration."

Yours sincerely,

ELLEN PRIESTLEY SMITH.

Hon. Secretary.

Such expressions of gratitude are very gratifying to those who have consistently supported the organisation of trained nursing by the State.

**INFLUENZA.**

In a circular on the subject of influenza the Ministry of Health state that it is apparent, as regards England and Wales, that influenza is epidemic in a few localised communities, and that the type is similar to but less severe than that of 1918-9, but that there is no evidence of the existence of pandemic influenza in these islands at the present time comparable with that which is occurring in American cities and in certain parts of Europe. In view, however, of the increase of the number of notified cases of pneumonia and the existence of the epidemic influenza mentioned above as occurring in certain schools, the Ministry again direct attention to their general warning, and re-emphasise the importance of attention to the measures therein advised.

**MACCALLUM v. SIR HENRY BURDETT AND OTHERS.**

The very keenest interest is being aroused in Nursing circles concerning the action for libel which Miss Maude MacCallum is bringing against Sir Henry Burdett, Editor of the *Nursing Mirror* and the *Hospital* for statements which appeared in his publications concerning her. We learn that a very large number of nurses who deeply sympathise with Miss MacCallum, intend to be present at the trial.

On Monday the following paragraph appeared in the *Times* :—

"Sir Henry Burdett, K.C.B., who has been suffering from overwork for some time, has been ordered a complete rest for two months, from which he hopes to derive great benefit."

Let us hope he will soon have recovered sufficiently to attend in the High Court of Justice, to reply to Miss MacCallum's Statement of Claim.

## SHORTER HOURS IN HOSPITAL NURSING SCHOOLS ADVOCATED.

The Educational Committee of the National League for Nursing Education, U.S.A., has recently issued two bulletins on the subject of "Shorter Hours in Hospital Schools of Nursing." In Bulletin Number 1, the case for shorter hours is presented under the following sub-topics:—

1. Why student nurses should have shorter hours—a summary of the main arguments.
2. How this question affects public health and welfare.
3. The long hours in hospital training schools are mainly responsible for keeping down the supply of good nursing recruits.
4. What are the present conditions of work in the average hospital training school?
5. What evidences exist to show that these conditions injure the health, or reduce the efficiency of the pupil nurse?
6. How have these conditions come about, and why have they continued to the present day?
7. Long hours in hospital training schools are not necessary. The eight-hour day has been fully tried out, and found to be as workable and more satisfactory than the old system.
8. The general movement for protecting the health and increasing the efficiency of workers is based on sound physiological and economic principles.
9. What are the common objections to the eight-hour day in hospitals, and how can they be met?

### 10. Conclusion.

Bulletin No. 2 is entitled "Suggestions for Establishing the Eight-hour Day in Nursing Schools." The sub-topics are:—

1. The problem.
2. Number of additional nurses required.
3. How to provide for more nurses.
4. The difficulty of housing more nurses.
5. The use of graduate nurses.
6. The use of ward helpers or attendants.
7. The use of labor-saving methods.
8. Getting the plan started.
9. Suggested schedules of hours.
10. Suggested schedules providing for a forty-eight-hour week.
11. What superintendents of nurses say about the eight-hour system.
12. Recent articles on the organization of the eight-hour day in hospitals.

Both of these bulletins contain information that is invaluable just now, when nursing schools are passing through a critical period of adjustment.

Copies may be secured from the Secretary of the Committee, Miss I. M. Stewart, Teachers' College, Columbia University, New York City. Single copies of Bulletin No. 1, 20 cents; single copies of Bulletin No. 2, 10 cents. A reduction in price will be made for quantities of 100 or over.

## IS RED CROSS MONEY TO BUILD COLLEGE OF NURSING, LTD.?

The sixth annual report of the Executive Committee of the Carnegie United Kingdom Trust was submitted at their annual meeting on the 25th ult. at Dunfermline.

The Trust's programme in connection with the physical welfare of mothers and children includes, the report states, the establishment of two central institutes, one in London and one in Edinburgh, and six welfare centres, one in each of the following places:—Birmingham, Liverpool, Shoreditch, Rhondda, Motherwell, and Dublin. Progress has been made with the preliminary arrangements for the Central Institute in London. Through the efforts of the Hon. Sir Arthur Stanley, chairman of the British Red Cross Society, a Central Council of Infant and Child Welfare has been constituted, on which are represented eleven of the principal welfare societies in London. To this council the Trust has promised a grant of £40,000 for the erection or purchase of a building to form an institute, the functions of which were set out in the Trust's fourth annual report. Since the Trust's offer was made to the council, the Red Cross Society have proposed to erect or purchase a very large building which would house the following activities:—(a) V.A.D. and Red Cross work; (b) a tuberculosis centre; (c) a college of nursing; (d) the central welfare work, for which the Trust's grant would be available. The executive committee have agreed to this proposal on condition that a distinct wing is provided for the purposes of the Central Institute.

We have asked Sir Robert Hudson, Chairman of the Joint Finance Committee of the British Red Cross and the Order of St. John, if the College of Nursing, Ltd., is to be erected with money collected from the public for the Sick and Wounded?

## WAR DISABLED NURSES.

### NEW GRANTS AND ALLOWANCES.

The Special Grants Committee of the Ministry of Pensions have framed new regulations under which certain grants and allowances may be made in special cases of war disabled nurses and their dependents. These regulations, which take effect forthwith, apply to members of the Royal Naval Nursing Service and Reserve, Queen Alexandra's Imperial Nursing Service, the Army Nursing Service, the Territorial Force Nursing Service, and any other Nursing Service or Reserve which is admissible under the Royal Warrant.

A supplementary or special allowance may be granted to a nurse where, in consequence of serious disablement arising from service during the war she is unable to maintain herself in her pre-war standard of comfort, but the supplementary or special allowance, together with any State pension which may be awarded, shall not exceed £90 a year. In exceptional cases grants may be

made to nurses to meet temporary distress or emergency. Recoverable advances may be made to nurses pending the receipt of moneys due, or which the Special Grants Committee consider may become due, from the State in respect of pension-gratuity or other payment, provided that such advances shall only be made in cases of real necessity.

Where the parent, brother, or sister of a nurse is deprived by her death, in circumstances arising from service during the war, of any regular support which the parent, brother, or sister was receiving from the nurse before or during the war, or might reasonably have expected to receive from the nurse after the war, a supplementary or special allowance may be granted, which, with any State pension which may have been awarded, shall not exceed the actual or prospective dependence, and shall not exceed the total of £60 a year.

When a nurse, by reason of disablement arising from service during the war, is unable adequately to maintain her children, or where a nurse dies in consequence of war service, allowances for maintenance and education, not exceeding in amount those which may be paid under the Royal Warrant of the Special Grants Committee's Regulations for the maintenance and education of the children of a disabled or deceased officer, may be granted if the husband or widower of the nurse is dead or if the committee are satisfied that he cannot be expected to support the children.

Applications for allowances or grants should be headed "S.G.O." and addressed to the Secretary Special Grants Committee, Officers' Branch, Millbank House, Westminster, S.W. 1.

There is now no excuse whatever for using our war nurses as the stalking horse for Shilling Doles for Nurses, and the sooner this camouflaged appeal for the College of Nursing Company is stopped the better.

### DOWN WITH DOLES.

The *Daily Telegraph's* Shilling Fund for Nurses has failed as such—and now it is dropping its demand for the "shining shilling" from the poor, and states that "it is upon the larger donations of the wealthier members of the community, and the important business firms, that the success of the scheme must ultimately depend." "Tommy of our alley," Sergeants' Messes, and other inexcusable sources are being tapped, and the College Matrons are whipping up their nursing staffs by every means in their power, and thus incidentally submerging the professional nurse into a subservient class.

We heard the whole matter discussed in the Lobby of the House of Commons recently, and what an astute M.P. wanted to know was—

(1) If the Nation's Fund for Nurses is a registered War Charity—1917, why has not the Committee issued its audited accounts and Balance Sheet? Ask Viscountess Cowdray.

(2) Why the London County Council, which is

responsible for the War Charities Act, has permitted this evasion of the law? Ask Sir James Bird.

(3) Why the Shop for Nurses in North Audley Street is also permitted to trade in contravention of the War Charities Act? Ask the paid saleswoman-in-charge.

(4) As the *Daily Telegraph* appeal is "made with the approval of the Council of the Registered War Charity, known as the Nation's Fund for Nurses," as stated in its columns, why has it been permitted to evade the law for a month?

(5) Does "Nurse Juliet" exist? If not, was the *Daily Telegraph* justified in publishing a fictitious appeal in her name, and inducing the public to subscribe money for her non-existent necessities?

Ask Viscount Burnham, Proprietor, and the Editor of the *D.T.*

And if all these people refuse to give full information concerning a Public Fund raised in the name of Nurses against their convictions, ask the House of Commons, and demand an investigation into the whole matter. It is high time.

*John Bull* has a pithy par *re* the dual appeal for distressed nurses and the College of Nursing Company. It thinks with us that as nurses are now to be registered by Act of Parliament, the appeal is degrading and, of course, agrees that if the nurses have failed in health in the service of the State, it is the State's duty to treat them generously. It adds: "It is incumbent upon the Government to do immeasurably more in the way of unemployment donation for the noble women who have suffered in consequence of their war work than for the munition-makers who received good pay for years."

### IRISH NURSES' ASSOCIATION.

Miss Alice Reeves, President of the Irish Nurses' Association, will be "At Home" on March 17th, at the Nurses' Home, Dr. Steevens' Hospital, Kingsbridge, Dublin, when a social gathering of the Irish Nurses' Association will be held. The result of the election for the Vice-President, Hon. Secretary, and Executive Committee of the Association will be declared during the evening.

### RANK FOR NURSES.

Hearty congratulations to Mrs. Helen Hoy Greeley, Counsel of the Committee to Secure Rank for American Military Nurses. She has worked splendidly, and it is just announced that Rank for Nurses is included among the provisions of the Bill for the reorganisation of the U.S. Army, introduced by Senator Wadsworth, of New York, and immediately referred to the full Senate Military Affairs Committee. Let us hope that justice will now be done.

Had our Sisters and Nurses the rank of Army officers they would have received very different treatment in the Army pay sheet terms during and since the Great War.

## APPOINTMENTS.

### MATRON.

**Rest for the Dying, Camden Row, Dublin.**—Miss Mary Stephenson has been appointed Matron. She was trained at the Royal City of Dublin Hospital; St. Margaret's Nurses' Home, Surrey Square, London; the Cork Street Fever Hospital, Dublin; and the Edinburgh Royal Infirmary. She worked as an Alexandra Nurse for the Soldiers' and Sailors' Families' Association, in connection with the Edinburgh Garrison, for seven years, and amongst the appointments she has held have been Matron of the Women and Children's Convalescent Hospital, Gilmerton, Midlothian; and Sister-in-Charge of the First Aid Station at the British Chemical and Explosive Gas Factory, Spondon, Derby.

**American Red Cross Maternity Hostel, 110, Grange Road, Bermondsey, S.E. 1.**—Miss G. E. Sewell has been appointed Matron. She was trained at Guy's Hospital, where she has done Sister's duties, and has been Sister-in-Charge of a War Hospital at Potter's Bar, and has assisted in the teaching of pupil midwives in connection with the Guy's Maternity District for fifteen months.

**Enfield Cottage Hospital.**—Miss Florence Toms has been appointed Matron. Miss Toms was trained at the Prince of Wales' General Hospital, Tottenham, where she latterly held the post of Theatre Sister.

**Cottage Hospital, Scarborough.**—Miss Margaret W. Cooke has been appointed Matron. She was trained at the David Lewis Northern Hospital, Liverpool, and has been Assistant Matron at the Royal Infirmary, Bradford, for ten years, and as a member of the Territorial Force Nursing Service did military nursing at home and abroad during the five years of the war.

### SISTER.

**Royal Infirmary, Perth.**—Miss Agnes Gourlay has been appointed Sister. She was trained at the Dumfries and Galloway Royal Infirmary, and at the Fever Hospital, Paisley, and has been Staff Nurse at the Fever Hospital, Paisley, and the Leith Public Hospital, and Sister at the Fever Hospital, Paisley. As a member of the Territorial Force Nursing Service she has served both at home and abroad.

Miss Agnes Shepherd has also been appointed Sister in the same institution. She was trained at the Royal Infirmary, Hull, and has been Sister at the County Hospital, Lincoln, and as a member of the Territorial Force Nursing Service has served at home and abroad.

### HEALTH VISITOR.

**Borough of Chelmsford.**—Miss Sarah Gwendoline Langford has been appointed Health Visitor. She has been a Queen's Nurse in Somersetshire, and has also been Health Visitor at Bristol, and Health Visitor and School Nurse under the Somerset County Council.

## QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

### TRANSFERS AND APPOINTMENTS.

Miss Agnes M. Stanford is appointed to East Sussex C.N.F., as County Superintendent; Miss Ethel Lyon, to Cornwall C.N.A., as Assistant Superintendent; Miss Olive Gordon, to Leamington; Miss Jeanie Grey, to Penzance and Madron; Miss Maud M. Hepburn, to Normanby Park; Miss Alice M. Hopkinson, to Kirkby Thore; Miss Jane R. Hunter, to Cheltenham; Miss Alice E. Middleton, to Crook; Miss Gertrude A. Sears to Forest Town; Miss Elizabeth A. Thornley, to Barton, Tirril and Martindale; Miss Elizabeth C. Wilson, to West Riding Training Home.

## THE HOSPITAL WORLD.

The Middlesex Hospital has benefitted to the extent of £5,000 by the exhibition of nurseries at the Ideal Homes Exhibition.

At the annual meeting of Thomas Wallis & Co., Holborn Circus, a special donation of £500 was allotted to St. Bartholomew's Hospital. A very generous gift.

The Alexandra Hospital for Children with Hip Disease, Queen Square, Bloomsbury, is shortly to be moved from London to the country. The British Red Cross Society has offered £25,000 towards the cost of the new buildings to be erected on the Caversham Hills provided that an equal amount is obtained by next July. It is proposed that some 50 beds at the new hospital shall be reserved for the soldiers and sailors who have contracted tubercular diseases of the bones and joints, a curious provision because in the first place the hospital is for children, and in the second, children with tuberculous diseases of bones and joints are not eligible for admission.

Mr. John Rankin, a well-known Liverpool ship-owner, has, on behalf of himself and wife, given £10,000 4 per cent. Victory Bonds to the Liverpool Hospital for Women.

Arrangements have been made by the British Red Cross Society, at the request of the Ministry of Pensions, for pensioners requiring massage and kindred treatment. Any man requiring treatment should apply either to his local War Pension Committee, to which the Commandant will direct him, or to the clinic nearest his home.

Miss P. Hill, Matron of the Adelaide Hospital, Dublin, expresses on behalf of the Committee of that hospital, and of herself, very grateful thanks to the many kind friends who have subscribed and persuaded others to subscribe, to the "Matrons' Appeal" for 100,000 half-crowns to clear the hospital of the debt of £10,000 which it incurred during the war. One-fourth of the required number of half-crowns has already been subscribed, and to add further to it it is proposed to hold a sale at the hospital on March 10th and 11th.

## TREATMENT AT INCLUSIVE COST.

An attempt to deal with the real difficulty of the middle classes to obtain skilled medical and nursing treatment at fees which they can afford has been made in Birmingham by a group of consultants, who, seven years ago, forwarded a scheme to provide special medical and surgical treatment at a moderate inclusive cost. The result has been the purchase of a house, and the erection of new buildings, on a freehold site, as a hospital for paying patients at a total cost of £22,000 obtained through the formation of a company and the issue of shares, of which every

member of the medical staff must be the holder in his own right of shares to the nominal value of £200.

This hospital for paying patients was opened in 1914, and with the exception of the first year when only 4 per cent. was paid, the preference shares have received 6 per cent. interest, and for the past two years a dividend of 6 per cent. free of tax has been paid on the ordinary shares.

The points of special interest are that the patients who pay a "composition" fee, know exactly what expense they will incur per week, for nursing home accommodation and all professional attendance. The fee which is not less than £5 5s., or more than £10 10s. per week is arranged between the patient, and the member of the medical staff concerned. Each member of the staff receives every month a statement showing the fees collected from his patients, and a cheque for the proportion due to him. "Composition" patients form 90 per cent. of the total admissions. Last year rather more than 900 patients were of the "composition" class. All these were unable to afford the cost of treatment in an ordinary nursing home, and would have been compelled to apply for admission into a charitable hospital, had St. Chad's not been available.

The remainder of the patients are ordinary "private" patients, who pay the usual fee to the physician or surgeon quite independently of the nursing home charges.

An example of an inclusive fee is that paid by a patient suffering from chronic appendicitis, the inclusive charge being £21. This covers the cost of the operation, the anaesthetic and three weeks' stay in hospital.

Mr. William Billington, M.S., F.R.C.S., who gives an interesting account of this hospital in the *British Medical Journal*, states that five years' practical experience of the working of the scheme, of which St. Chad's hospital is the outward and visible sign, has demonstrated that with proper organization, "paying" hospitals can be made a success, and satisfy the consultant, the practitioner and the patient.

### BRITISH INDUSTRIES FAIR.

The leading feature at the exhibit of Burroughs Wellcome & Co., at the British Industries Fair, was "Wellcome" brand sodium salicylate, the special advantages of which include physiological purity, whiteness, flakes which do not cake on the scalepan or paper, freedom from dust, easy solubility, bright, clean, water-white solution which does not require filtering.

In view of the recent exposures as to the deficiency in weight of unbranded saccharin tablets, "Saxin" claims attention by reason of the fact that it carries Burroughs Wellcome & Co.'s guarantee as to purity, strength and sweetening power.

### TRUE TALE WITH A MORAL.

*Paisley "Buddie" to Canvasser:* "Ah! weel. I dinna ken ane fra t'ither, but me feyther, me granfeyther, and me great granfeyther voted Leebral, and I'll be aboot doing the same!"

## BOOK OF THE WEEK.

### "THE INDIAN DRUM."\*

Near the northern end of Lake Michigan, where the bluff-bowed ore carriers and the big, lowly wheat-laden steel freighters from Lake Superior push out from the Straits of Mackinac, there is a copse of pine and hemlock back from the shingly beach. From this copse—dark, blue, primeval—there comes at times of storm a sound like the booming of an old Indian drum. This drum beat, so tradition, whenever the lake took a life, one beat for every life.

When, however, the new steel freighter *Miwaka* was lost on her maiden trip with twenty-five aboard, only twenty-four strokes of the drum were heard, and the friends of those on the ill-fated boat for years clung to the hope that the survivor in whom they firmly believed might turn out to be their own particular loved one.

It is round the sole survivor of the *Miwaka* that the thrilling romance is woven, and certainly as a vividly-written tragedy it would be hard to beat. At the outset of the book, Corvet, the wealthy ship-owner, disappeared suddenly and absolutely, leaving a will in favour of an unknown young man, who was to inherit immediately. The disappearance and the will combined, naturally caused consternation in the circle of Corvet's friends. Who was this young man? what his relationship to Corvet? Alan Conrad, of Blue Rapids, Kansas, himself had no more idea than anyone else.

Alan had been brought up by foster parents and payment for his upkeep had come in an irregular manner from time to time. One day suddenly a letter had arrived, telling him, rather than asking him, to start at once for Chicago.

Was Corvet his father? The mystery of Alan's life was going to be answered.

Arrived at his destination, the news came to him from the charming daughter of the Sherril's—Corvet's intimate friends—that the man who had made such strange disposition of his property had completely disappeared, and the mystery surrounding Alan was as impenetrable as ever.

Between them, the Sherrils and Alan naturally arrive at the erroneous conclusion that Alan is Corvet's illegitimate son, though this, of course, did not account for his disappearance or his strange will.

Alan, in his search among Corvet's papers, comes across a mysterious manuscript, from which he follows up many clues.

The facts of the case were these. Many years ago Corvet, a ship-owner, in a moment of temptation, sank, under circumstances which are graphically described, a rival ship-owner's new boat, with the owner on board, thus ridding himself of dangerous competition. The owner's child, little Alan, had been the sole survivor; too young he was to be a hostile witness; and Corvet, in his remorse,

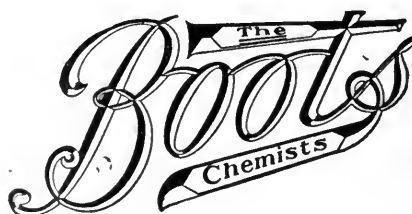
\* By William Mac Harg and Edwin Balmer. Stanley Paul & Co.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

smuggled him ashore and sent him away and told Spearman (his partner in crime) that he had died. He had secretly sought and followed the fate of the kin of those people who had been murdered to benefit him.

Not fundamentally a bad man, he had ever been haunted on stormy nights by the screams of the drowning crew, and his remorse culminated in his disappearance and renouncing everything he possessed in favour of Alan, the son of the murdered ship-owner.

Alan himself again came near to perishing on the lake under dramatic circumstances, but the Drum once more proclaimed the survival of one person.

Constance Sherril, who, by this time, loved Alan, keeps watch on the beach for news of him.

"The sound of the Drum was continuing, the beats a few seconds apart. The opening of the door outside had seemed to Constance to make the beats come louder and more distinct. Twenty—twenty-one—twenty-two. Constance caught her breath and waited for the next beat; the time of the interval between the measures of the rhythm passed, and still only the whistle of the wind, and the undertone of water sounded. The Drum had beaten its roll and for the moment was done. 'Now it begins again,' the Indian woman whispered. 'Always it waits and then it begins over.'"

Constance let go her breath; the next beat then would not another death. Always the Drum-beats counted one short of the men who had been on the boat, and Constance's sensitive instinct truly guessed that the survivor was the man she loved.

Thus twice in his life-time the Drum proclaimed Alan's almost miraculous escape from drowning.

It is pleasant after the stress and strain of the exciting happenings recorded in this book to read of the union of Alan and Constance. Together they visit the humble home where his young mother had given him birth, and of whom, now that the stigma that had hung over him was removed he could think with pride. They were very quiet as they stood looking about.

"I wish we could have known her," Constance said. Alan choked. "It is good to be able to think of her as I can now."

This is a really remarkable book and its interest is well sustained from beginning to end. H. H.

### COMING EVENT.

March 6th.—Irish Nurses' Association. Annual Business Meeting. 34, St. Stephen's Green, Dublin. 8 p.m.

### A WORD FOR THE WEEK.

*Holiness* is an infinite compassion for others.

*Greatness* is to take the common things of life, and walk truly among them.

*Happiness* is a great love and much serving.—*Olive Schreiner.*

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### PROFESSIONAL UNION OF TRAINED NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING

DEAR MADAM,—With regard to a letter in your issue of the 28th ult. by Miss Klaassen, I should like to state that the Professional Union of Trained Nurses has no Strike Clause whatever in its constitution. We rely upon the fact that, as the College of Nursing "Bulletin" points out, "Trade Unionism for nurses . . . gives them a weapon—with the force of the law behind it."

Miss Klaassen seems to imply that the strike in Carrickmacross was caused by a trade union. It would be interesting to know if the nurses concerned *are* members of the Irish Trade Union, or whether they have acted in an independent manner. I think this is probably the case, as, if they had been members of a trade union, they would perhaps have found it unnecessary to resort to so drastic a method of righting their grievances.

Yours faithfully,

MAUDE MACCALLUM,

17, Evelyn House,

62, Oxford Street, W. 1.

Hon. Sec.

### NURSES ON STRIKE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—In reply to the letter from Miss Klaassen in the current issue, I venture, as a nurse and trade unionist, to submit the following extracts from the preface to the rule book of "The Friendly Society of Iron Founders," which, established in 1809, is the oldest trade union in the British Isles:—

"Trade unionism, when rightly understood, teaches us the virtues and values of self-denial and mutual forbearance; the sinking of minor differences in order that we may be the better able to concentrate our forces."

"Trade disturbances and strikes we all deplore, and as much as possible avoid. It becomes us to study carefully the causes of disquiet—to trace them to their foundation, and try by every means in our power to settle them amicably."

"If there is a class of men who could and should work amicably to the interests of themselves (and indeed to the interests of their employers also) trade unionists are certainly that class."

I fully endorse the view expressed in the above extracts, but must at the same time emphasize the fact that there are always two parties to a strike; one distracted from the ordinary course of their duties by the pressure of an intolerable situation; the other responsible for that intolerable situation and whose duty it should have been to prevent it. Anyone having the slightest experience in trying to obtain a petition or a decision

of any kind requiring support from the majority of those concerned, will be able to realize the intense dissatisfaction which must prevail amongst a body of workers, before it results in a decision to strike.

That nurses should strike is lamentable; that they should be reduced to the necessity (even if only in their own opinion) to strike, is a grave reflection on the particular administration which is responsible.

Yours sincerely,

THERESA MCGRATH.

45, Lloyd St. South,  
Manchester.

### KERNELS FROM CORRESPONDENCE.

*Miss G. Le Geyt.*—I send my subscription for the beloved *B.J.N.* . . . I really find the JOURNAL more absorbing every week.

*Glasgow Nurse.*—"May I thank you for the exhaustive report given in your excellent journal of our P.U.T.N. meeting in Glasgow. It was a pity the matrons did not attend to hear the 'heart to heart' speeches. I enclose my subscription for *B.J.N.*"

MERELY A MATRON-HOUSEKEEPER.

*Teaching Sister.*—"I don't see why a Matron should be merely a Matron-Housekeeper because a Sister-Tutor is appointed. At this small hospital I have acted in conjunction with the Matron as Teaching Sister, and there is no doubt the probationers have found the benefit of practical help. We make a very great point, as you recommend, of perfection in practical nursing, and marks are awarded for splints, bandages and needlecraft needed in nursing. It is sad to see grown women such bogglers with the needle, as many probationers are these days. I go in for 'quizzes' on the American plan."

MINISTER OF HEALTH OUR CHIEF.

*Esther Morris.*—"From the Sheffield papers the propaganda of the College of Nursing Company claims that it is the authority for organizing the nursing profession. The nurses must not be led astray by these pretensions. This will be the duty of the General Nursing Council; and the Minister of Health, not the chairman of the College Company, is to be our Chief—according to Act of Parliament.

DOWN WITH DOLES.

*Long Time Subscriber.*—"As the Matron of our County Hospital has issued an appeal in support of the *Daily Telegraph* Shilling Fund for Nurses, of which my daughter, who is a trained nurse, most strongly disapproves, I have determined to discontinue my annual subscription to that institution. My friends will do likewise. The nursing staff were never consulted, and will have to contribute whether they wish to do so or not. I was pleased to read the instructive letter in the "Woman's Leader." [We hope our correspondent will give her reasons to the Committee.—ED.]

*D.C.H., Southend.*—"I sent the *B.J.N.* reporting the Nurses' Protest against the Shilling Fund to my brother who is in the Navy, and asked him not to contribute, as trained nurses did not want charity, but self-government under decent economic conditions, and said that the *Daily Telegraph* refused to publish both sides of the question. I have also forwarded last week's 'Down with Doles,' and the admirable verses, and added: 'May you ever be spared the ministrations of "Nurse Juliet."'"

(We advise self respecting nurses who have relations or friends in the Navy and Army to let their objections be known—as the *Daily Telegraph*, and other newspapers are determinedly boycotting their opinion and thus misleading their readers.—ED.)

*Hospital Sister.*—"It seems almost incredible but nurses do take gifts from patients in this hospital. We take better-class patients, farmers, etc. I found one of my nurses was accepting fresh butter from a patient's wife, and money has also been accepted. This is a hotbed of 'College,' and as the College Council is advocating 'begging from military patients and others, what is the difference? This shilling appeal is most demoralising."

(We see no difference. If the Matron of the hospital supports the principle of nurses begging from patients, outside the hospital, she cannot punish the nurses for taking tips inside it. Nothing could be more unethical and degrading.—ED.)

MONEY GIVEN FOR SICK AND WOUNDED.

*Soldier's Mother.*—"As I note in the *D.T.* that the Red Cross are going to erect the College of Nursing, this means that money given to the sick and wounded will be used. No need to collect at sergeants' messes and before the mast for shillings, as this luxury building will cost those who fought and suffered in the war thousands of pounds."

### REPLIES TO CORRESPONDENTS.

*Scotia.*—No replies can be inserted to anonymous correspondents. Name and address must always be enclosed, not necessarily for publication.

MACCALLUM v. SIR HENRY BURDETT.

We have received numerous letters commenting upon our report of the meeting of the Nurses' Co-operation on February 10th, but as the libel action of MacCallum *versus* Burdett, the Scientific Press, Ltd., and Messrs. Eyre & Spottiswoode, Ltd., printers, is impending at an early date, we have decided to publish no letters on this controversy which are not signed.

### OUR PRIZE COMPETITIONS.

QUESTIONS.

*March 6th.*—In what cases may profuse sweating occur as a prominent symptom?

What are the causes of this sweating, and what its special nursing?

*March 13th.*—How would you feed a baby, eight months' old, after an operation for intussusception?

# The Midwife.

## MATERNITY HOSPITALS AND HOMES.

The Ministry of Health has issued an important Memorandum in regard to Maternity Hospitals and Homes, published by His Majesty's Stationery Office, price 9d. net, with plans, which would be of great value to any Authority or person, contemplating the building of such institutions.

The Memorandum states that "the welfare of the mother before, during and after the birth of her child is a matter of vital importance, and one which has not received adequate attention in the past. The infant mortality rate has shown a fairly steady progressive decline for a number of years past, but the maternal death-rate due to child-birth is little lower now than it was seventy years ago. . . . The amount of avoidable sickness and suffering arising out of child birth is one of the tragedies of the lives of our working class mothers. It is surely a primary duty of the nation to endeavour to make maternity as safe as possible for mother and child, and to reduce to a minimum its discomforts, inconveniences and disabilities.

"Action to secure this may be taken in various ways. For example, by means of an improved education and training in midwifery and gynaecology for doctors, midwives and nurses; the provision of a fully efficient midwifery service available for all women the organization of effective ante-natal supervision, the securing of adequate nutrition for expectant and nursing mothers; arrangements for the treatment of ailments incidental to pregnancy; and by the establishment of sufficient Maternity Homes and Hospitals to meet the requirements of pregnant women in these respects. It is with the provision of such institutions that this Memorandum is concerned."

It is manifest that, if the health of the nation is to be built up on a sound foundation, we must begin with the care of the woman with child, and the Memorandum under discussion is timely and necessary.

The Memorandum states that "there can be no question as to the pressing need for Maternity Hospitals and Homes, designed on the most modern and efficient lines. . . . Two classes of patients, broadly speaking, are in need of such provision:—

"(1) Patients showing some abnormality either during pregnancy or at the time of labour, which calls for special medical treatment and skilled nursing.

"(2) Patients whose domestic conditions are unfavourable for confinement in their own homes, even when a normal labour may be expected."

In connection with maternity hospitals, it is proposed that there should be an out-patient department which should serve for the treatment of patients referred by doctors or midwives, or sent from ante-natal clinics.

Under the heading of "Notes on Organisation," the Nursing Staff is discussed. It is laid down:—

"The Matron should be a trained nurse and an experienced midwife, and the Sisters should also have had training in general nursing as well as midwifery. The nursing unit will depend on whether pupil midwives are taken, and it is therefore impossible to lay down any definite rule. Adequate, trained supervision is essential. Speaking generally, the minimum staff will be such as will provide, on the average, one nurse for every three mothers and their babies by day, and for every eight to ten mothers and babies by night. A special staff is needed for the labour room, and for attendance on isolated or "separated patients."

An interesting point is the statement that "The practice of nursing puerperal fever in ordinary isolation hospitals is not one to be altogether commended. It is better for these cases to remain under the supervision of the Maternity Hospital when practicable. Skilled obstetrical treatment is needed, and the midwives should observe the course and conduct of the septic as well as normal cases."

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

### EXAMINATION PAPER.

The following are the questions set in the Examination Paper on February 2nd:—

1. What are the special precautions to be taken regarding the eyes of the new-born infant, and for what purpose are they taken? Are there any circumstances in the condition of the mother which would cause the midwife to redouble these precautions?

2. What points would you inquire into on visiting the mother and her infant during the early days of the puerperium? What conditions may give rise to elevation of temperature on the third or fourth day?

3. *Post-partum hæmorrhage*. What leads to this, and what would you do if it occurred?

4. You are sent for by a woman in labour who has just been delivered of a child. You feel that there is another in the uterus. Give in full detail your management of the case.

5. How should the breasts be treated—(a) Before labour; (b) With a dead-born full time child?

6. What are the duties of the midwife, according to the Rules of the Central Midwives Board, towards the patient in regard to the following points?—(a) In the matter of staying with the patient after labour has begun. (b) Passing the catheter. (c) If the life of the new-born child appears to be in danger.

# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### A GREAT HEALTH COMBINE REQUIRED.

There is no question that the financial affairs of the voluntary hospitals have reached an acute crisis, partly, no doubt, the result of the abnormal cost of living. With the advent of the Ministry of Health, and the increased precision of scientific methods now recognised as necessary in the treatment of the sick, the co-ordination of all health agencies, curative and preventive, becomes necessary, and the hospitals will inevitably fall into line as factors in a State scheme—perhaps a scheme of National Insurance, covering provision for the varied necessities of the insured sick.

Other factors in the passing of the voluntary hospitals are the high wage now commanded by the working classes, and the shrinking incomes of the middle classes who, in the past, have been liberal supporters. The middle classes can no longer afford the financial support they have given hitherto, nor is it equitable that they should deny themselves to provide free hospital treatment for persons better off than they are.

Just as the support of hospitals by the Religious Orders gave place to control by lay committees, and the voluntary system, so the voluntary hospitals—which in their day have done such splendid work, and relieved an incalculable amount of suffering and sickness—must in their turn inevitably give place to State Hospitals, which, in all but name, our poor law infirmaries are at the present time, and responsibility for the largely increased cost of maintenance be thus assumed by the community at large—not by a comparatively few philanthropic persons.

A sign of the times is that the Governors of the London Hospital have decided to ask for a weekly payment from all inmates except those who are too poor to pay, the sum mentioned being 10s. a week.

In proposing the adoption of the new scheme Lord Knutsford said that each patient cost the Governors £4 a week. They owed their bankers £52,000. There were just enough securities to meet that, and then they were "on the rocks." He urged that the Government should allot the Amusements Tax to the hospitals, for he was sure that people who were amusing themselves would not object to doing something for those who were sick and suffering.

Such desperate expedients may, for a time, delay the inevitable, but it is as certain as it is equitable that the voluntary hospitals will come into a great "health combine," and be controlled, in so far as medical and nursing science are concerned, by professional experts. A system of insurance must cover the cost.

Now that we have the Ministry of Health at the head of the Health Department of this country, it is proper, and reasonable, that all the agencies concerned in the maintenance and restoration of health, and the amelioration of sickness, shall eventually be co-ordinated under its control on a systematic plan. What is required is a survey of the whole provision of public health services now existing, and the establishment of others to fill gaps at present vacant, which can then be linked up together, and economy in administration effected, by reserving hospitals for the treatment of acute cases, while district nurses, and preventive and remedial agencies of various kinds, will diminish the demands upon the more expensively equipped institutions.

## OUR PRIZE COMPETITION.

IN WHAT CASES MAY PROFUSE SWEATING OCCUR AS A PROMINENT SYMPTOM? WHAT ARE THE CAUSES OF THIS SWEATING, AND WHAT ITS SPECIAL NURSING?

We have pleasure in awarding the prize this week to Miss Winifred M. Appleton, University College Hospital, Gower Street, London.

### PRIZE PAPER.

Perspiration (derivation Latin *perspirare*) is fluid evaporated through the excretories of the skin, and is produced by microscopic sweat glands scattered over the surface of the skin; the process of its evaporation by means of sweat ducts is constant, and amounts to over one pint in twenty-four hours; this is known as "insensible perspiration."

Under various conditions, as exertion, diseases, and many fevers, drops of "sensible perspiration" appear on the skin, and are generally termed sweat; sweat is a watery fluid, containing a small percentage of solids, germs, and fatty material, and is faintly acid.

The chemical fact that the combination of oxygen with an organic body generates heat applies also in chemistry of the body. Oxygen inhaled by the respiratory organs is recognised as the "staff of life," and in the body produces  $\text{CO}_2$  and  $\text{H}_2\text{O}$ , which is constantly eliminated by the excretory organs, especially the skin.

Circulation of blood and lymph distributes heat over the body, and the chief object of perspiration is to maintain an even body temperature by regulating the loss of body heat, which is largely dissipated by radiation and conduction from the skin. Metabolism is largely affected by heat produced in the body; and the curing of diseases and healing of wounds is brought about by healthy activity of the tissues, hence the need of careful personal hygiene, efficient ventilation, and nourishing diet.

Hyperhidrosis, or excessive sweating, when accompanied by foetid odour, is known as bromidrosis, and may be general or local. It occurs in general diseases, as tuberculosis, rickets, malaria, rheumatic fever, sepsis, and many acute diseases, particularly where there is pyrexia. Otherwise the cause may be disease of the sweat glands. Persons of weak muscular power perspire often on slight exertion or when exposed to heat; profuse perspiration is associated with marked debility; sometimes it is due to emotional causes, and occasionally occurs without apparently an adequate cause.

In rickets a child often sweats freely when asleep, mainly about the head.

"Night sweats" are a special symptom of the later stages of phthisis, and, when associated with an oscillating temperature, are due

to sepsis, caused by the presence of pyogenic organisms in the broken down lung tissue. If they occur in earlier stages they are probably due to reflex-vaso-motor disturbances. Excessive alcohol interferes indirectly with the excretory functions of the skin by producing dilatation of its blood vessels.

When profuse perspiration is present the excretion of urine is frequently diminished. A cutaneous affection known as sudamina may be seen on persons who perspire freely, either in health or where there is febrile disease. It is characterised by an eruption of minute vesicles, due to retention of sweat in the skin. Chromhidrosis is a condition where there is secretion of coloured sweat.

The use of certain drugs increases perspiration, and are known as diaphoretics, the chief being pilocarpine, opium, and ipecacuanha. Anhidrotics are drugs which diminish the amount of perspiration, and are used either for general conditions, as in phthisis, or for local conditions, as "sweating of the feet." Many of these drugs act peripherally. The chief are atropine, hyoscyamus, and stramonium; local application of cold has also a similar action.

Appropriate treatment of the disease causing excessive sweating is essential; meanwhile it may be checked by the carrying out of general principles, namely, sponging the skin with vinegar and water or methylated spirit, and dusting with talc powder, or a powder composed of equal parts of starch, boric acid, and zinc powder. The administration of astringent drugs, especially belladonna, which may be applied in liniment locally, or by extract and preparations given by mouth or hypodermically. The heavy sweats and feeling of weakness found in patients are mainly due to exhaustion of nervous system, therefore stimulating drinks, as hot beef tea, Benger's Food, milk, &c., at night are useful in diminishing exhaustion and sweating.

The patient must wear wool or flannel next skin, but avoid overloading with heavy clothes.

Garments and bedclothes soaked with perspiration must be quickly removed, and the patient rubbed briskly down with warm towels and clothed in fresh warm clothes and given a hot drink. Tepid baths, followed by brisk rubbing, are beneficial, and carefully graduated exercise if patient is able to be about.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Jean M. Scott, Miss P. Thomson, Miss M. Drummond, Miss Amy Matthews.

### QUESTION FOR NEXT WEEK.

How would you feed a baby, eight months old, after an operation for intussusception?



## NURSING ECHOES.

It is very difficult in these days of costly production for a weekly nurses' paper to deal at length with every section of nursing, so that Queen's Nurses are happy to have their own monthly magazine, which gives special information of interest to them. The Editorial this month congratulates the "party of progress" on the passing of the Nurses' Acts, after the long fight, and advises nurses "to register early and do their level best to make the Act successful to the fullest possible extent." It remarks that "members of the College of Nursing, Ltd., will presumably register through their centres, and we hear that their fee to the College, if already paid, will, on their admission to the State Register, be returned to them."

We see no reason for any nurse to place her name on the State Register through any intermediary. Each nurse will be required to make her own application for State Registration to the General Nursing Council, and the sooner she begins to do her own business the better. State Registration means that the principle of self-government has been granted, and it is much to be hoped that government by deputy will now cease. Nurses have, for the future, to think, speak and act for themselves. Leading strings should be snipped without further ado.

THE BRITISH JOURNAL OF NURSING, the Registration organ, intends to keep the profession well informed concerning the "progress of State Registration" in the future, as it has in the past, and by way of getting ready we advise nurses to get a copy of their birth certificate, as it will certainly be required by the General Nursing Council.

We are glad to note that the *Daily News* has devoted much space recently to the conditions of nursing and the trained nurse, and, after investigation, comes to the conclusion that "the only prospect at present of establishing the nursing profession on a proper professional footing lies in the Council which is shortly to be set up by the Ministry of Health." That is the opinion the *B.J.N.* has been expressing and pushing for thirty years. Now we have won it we must make use of our Statutory Council.

In a report to the Medway Guardians, the Nursing Committee recently reported that Mr. Snowden, General Inspector, and Dr. Fuller, Medical Inspector of the Ministry of Health, had attended a meeting of the Committee and

explained the requirements of the Ministry of Health with regard to Poor-Law Infirmaries throughout the country, as follows:—

"That where there is an institution with a Resident Medical Officer and a nursing staff, that institution should be thoroughly and properly staffed; that all institutions of 200 beds or over should appoint a Visiting Medical Officer, a Visiting Surgical Officer, and a Visiting Children's Diseases Officer.

"That the proportion of patients to nurses shall not be more than six to one, both in the case of night and day nurses.

"That in infirm wards the proportion of patients and nurses shall not be more than nine to one.

"Every institution should train as many probationers as they can.

"That the eight hours a day system should be applied as far as the nursing staff is concerned.

"That where there are 200 beds for sick or over, an Assistant Resident Medical Officer should be appointed.

"That board wages are allowed to nurses when on holiday.

"That if possible arrangements should be made for the probationers to receive surgical and midwifery training."

Following the presentation of this report, Mrs. Hitches observed that the foregoing were not orders, but suggestions that the Board should consider, and she proposed that they be referred to the Nursing Committee. This was adopted.

Miss Bertha Cave, who for a number of years has been the proprietor and Superintendent of the Kensington Gardens Nurses' Club, 56 and 57, Kensington Gardens Square, Bayswater, W., has disposed of the business to Miss Margaret Thèresa Hurst, to whom we cordially wish a prosperous future. We hope that before engaging in new work Miss Cave will take the rest she has so well earned. Nurses resident there have always been sure that their telephone messages will be received and delivered with courtesy and promptness, a most important consideration in the case of private nurses. The close attention entailed, in addition to the heavy responsibility of running a Club in war time, is of a nerve-racking quality, and we wish Miss Cave a spell of quiet and refreshment outside the radius of any telephone service.

Countess Frances Wrenzel Wratishaw, of British birth, widow of Count Wratishaw, left to her nurse, Miss Nana Campbell, her bulldog, a French clock with pendulum set with

brilliant, a diamond ring, and all her wearing apparel.

We are informed that until demobilised Canadian nurses have been resettled in civil employment in Canada, English nurses are not needed in the Dominion. The Ontario Government, as we recently reported, are engaging young women, mostly V.A.D.'s, for three years' training in mental nursing—the salaries to be from about £60 to £84 per annum. No doubt women think carefully before binding themselves for service in a new country, but V.A.D.'s are not in any number entering for training at home. They do not care for the arduous routine of a civil hospital after the excitement of military work, and the consideration and status accorded to them during the war.

The inquest on Miss Florence Nightingale Shore—a trained nurse who was attacked in the London-Hastings express, and died later in the East Sussex Hospital as the result of the injuries she received—concluded at Hastings on March 3rd without any light being thrown on the author of the crime. The guard of the train gave evidence as to a man who left the train at Lewes, but said he could not identify a man put up for identification by himself and other people.

Dr. Spilsby described the wounds, and said that death was due to coma resulting from fracture of the skull, and injury to the brain. The injuries might have been caused by the butt end or side of a revolver.

Dr. Bertha A. Beattie, house surgeon at the East Sussex Hospital, gave evidence as to Miss Shore's condition on admission; and Dr. Christopherson, senior surgeon at the hospital, said nothing could be done to save Miss Shore's life: the laceration of the brain was too deep.

The coroner, in summing up, said that very little could be gathered from the descriptions of the wanted man put in possession of the police. They hardly amounted to a clue.

In returning a verdict of wilful murder against some person or persons unknown, the jury added a rider to the effect that they were satisfied that every means had been taken to find the murderer.

#### NOTICE.

The Manager, BRITISH JOURNAL OF NURSING, 431, Oxford Street, London, W. 1, will be glad to pay for clean copies of the JOURNAL of January 24th and February 7th, if any readers who do not bind their copies can supply them.

## THE GENERAL NURSING COUNCIL FOR IRELAND.

The Irish General Nursing Council met on Wednesday, February 25th, when Dr. E. Coey Bigger, M.D., D.P.H., Chairman, Irish Public Health Council, was unanimously voted to the chair. A Sub-Committee was formed consisting of the Chairman and the members resident in Dublin, to draw up the Rules and submit them to the Council subsequently. The Sub-Committee consists of Dr. Coey Bigger, Miss M. Huxley, Miss A. Reeves, Miss O'Flynn, Miss Vera Matheson, and Colonel Taylor, C.B., F.R.C.S.I. The Committee will start work immediately.

## HONOURS FOR NURSES.

### ROYAL RED CROSS.

The King conferred decorations, as follows, at an Investiture at Buckingham Palace on March 3rd:—

#### THE ROYAL RED CROSS (FIRST CLASS).

Queen Alexandra's Imperial Military Nursing Service.—Miss Mary Newman and Mary, Mrs. Sampson. Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Beatrice Tanner.

#### THE ROYAL RED CROSS (SECOND CLASS).

Royal Naval Nursing Service.—Miss Lilian Swift. Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Mary Daly, Miss Mary Furdham, Elsie, Mrs. Melville, Miss Mary O'Dowd, Miss Mary Powell, Miss Kate Skinner, and Miss Mildred Stewart.

Territorial Force Nursing Service.—Miss Lily Chapman, Miss Amy Martin, Miss Marion McMillan, Miss Gwendoline Quentrall, Miss Jean Robertson, and Isabella, Mrs. Storar.

Civil Nursing Service.—Miss Gertrude Piper. British Red Cross Society.—Miss May Francis, Miss Caroline Lawson, and Miss Ellen Munro. Voluntary Aid Detachment.—Miss Theodora Almack, Miss Margaret Coombes, Miss Mary Earle, Miss Cicely Jackson and Miss Elizabeth Thompson.

At an Investiture at Buckingham Palace on March 5th, the King conferred decorations as follows:—

#### BAR TO THE ROYAL RED CROSS.

Queen Alexandra's Imperial Military Nursing Service.—Miss Agnes Weir,

#### THE ROYAL RED CROSS AND BAR.

Queen Alexandra's Imperial Military Nursing Service.—Miss Catherine Stronach,

#### THE ROYAL RED CROSS (FIRST CLASS).

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Mary Cooper, Miss Ethel Devenish-Meares (also received the Military Medal), and Miss Lilian Wheatley.

#### ROYAL RED CROSS (SECOND CLASS).

Queen Alexandra's Imperial Military Nursing Service.—Miss Olive Matthews.

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Florence Clieve, Miss Winifred Hoare, Miss Florence Morgan, Miss Jessie Scott, and Miss Annie Wright.

Territorial Force Nursing Service.—Miss Gertrude Chandler, Miss Lilian Clieve, and Miss Mary Stollard.  
British Red Cross Society.—Miss Gertrude Male.  
Civil and War Hospitals.—Miss Mary Mathwin.  
South African Military Nursing Service.—Miss Annie Martin.

#### THE MILITARY MEDAL.

Territorial Force Nursing Service.—Miss Rosa Brain.

Queen Alexandra received at Marlborough House the members of the Military Nursing Services who have been awarded the Royal Red Cross and the Military Medal subsequent to the Investiture at Buckingham Palace on each occasion.

#### AWARD OF ROYAL RED CROSS (SECOND CLASS.)

The King has been pleased to award the Royal Red Cross to the following ladies in recognition of their valuable nursing services in connection with the War:—

Miss M. E. Hards, Staff Nurse, Q.A.I.M.N.S.R., Mil. Hosp., York; Miss A. Bill, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Tidworth; Miss M. L. Hunter, Actg. Matron, Q.A.I.M.N.S.R., the Lord Derby War Hosp., Warrington.

Miss B. Ibbotson, Staff Nurse, T.F.N.S., 2nd Scottish Gen. Hosp., Craigleith, Edinburgh; Miss K. Irvine, Sister, T.F.N.S., 2nd Northern Gen. Hosp., Beckett's Park, Leeds; Miss E. Irving, Sister-in-Charge, T.F.N.S., Netherfield Road Aux. Hosp., 1st Western Gen. Hosp., Liverpool.

Miss G. S. Jacob, V.A.D., Assist. Nurse, Reading War Hosp., Reading; Miss A. E. Jardine, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Colchester; Mrs. E. M. Jay, V.A.D., Nurse, King Edward VII Hosp., Windsor; Miss G. M. Jones, Sister, Q.A.I.M.N.S.R., Kitchener Hosp., Brighton; Miss H. S. Jones, Staff Nurse, Q.A.I.M.N.S.R., Mil. Hosp., Woking.

Miss M. McM. Kerr, Sister, Q.A.I.M.N.S.R., Addington Park Mil. Hosp., E. Croydon; Miss E. R. Knox, Night Sister, Welsh Metropolitan War Hosp., Whitchurch.

Miss E. Lander, Sister, T.F.N.S., 4th London Gen. Hosp., Denmark Hill; Miss E. Lindsay, Sister, T.F.N.S., 2nd Northern Gen. Hosp., Becketts Park, Leeds; Miss G. C. B. Lloyd, Matron, Devon Nook Aux. Mil. Hosp., Chiswick; Miss E. I. Loosley, Staff Nurse, Q.A.I.M.N.S.R., King George V. Hosp., Dublin; Miss N. M. Lucas, Spec. Mil. Probationer Asst. Nurse, Mil. Hosp., Colchester; Miss E. A. Lucke, Nurse, Queen Alexandra's Hosp. for Officers, Highgate.

Services at the regional office with a view to the necessary treatment being provided.

Appended is a list of the addresses of the regional Commissioners and the counties comprised in each region, but the local war pensions committee will supply any officer or nurse with the address of the appropriate regional office upon request:—

Scotland: Adelphi Hotel, Cockburn Street, Edinburgh.

Northern (Northumberland, Durham and Cumberland): 14, Clayton Street West, Newcastle-on-Tyne.

North-Western (Lancashire, Cheshire, Westmoreland and Isle of Man): 13, Piccadilly, Manchester.

Yorkshire: 7, Boar Lane, Leeds.

Wales (all Wales and Monmouthshire): Angel Building, Cardiff.

West Midlands (Staffordshire, Shropshire, Warwickshire, Worcestershire, and Herefordshire): Bethany Buildings, Loveday Street, Birmingham.

East Midlands (Leicestershire, Lincolnshire, Nottinghamshire, Derbyshire, Northamptonshire and Rutlandshire): Black's Building, Stoney Street, Nottingham.

South-Western (Gloucestershire, Wiltshire, Dorsetshire, Somersetshire, Devonshire and Cornwall): Clifton Down Buildings, Bristol.

Eastern (Norfolk, Suffolk, Cambridgeshire, Huntingdonshire, Essex, Bedfordshire, Hertfordshire, Buckinghamshire, Oxfordshire, and Berkshire): 80, Westbourne Terrace, W. 2.

London: Crown Agents' Annexe, Westminster House, Millbank, S.W. 1.

South-Eastern (Kent, Surrey, Sussex, Hampshire, Isle of Wight, and Channel Islands): 46, Grosvenor Gardens, S.W. 1.

Ulster: Grand Central Hotel, Belfast.

Ireland, South (Munster, Leinster and Connaught): Dunlop House, Abbey Street, Dublin.

Officers and nurses are advised that, in the event of their making their own arrangements for treatment without the prior approval of the Commissioner of Medical Services of the Ministry of Pensions, it may not be possible to refund to them any of the expenses thereby incurred. Any communication with regard to the award of retired pay or pension should be addressed to the Officers' Awards Branch, Cromwell House Annexe, Millbank, S.W. 1.

## DISABLED OFFICERS AND NURSES.

### REGIONAL ARRANGEMENTS FOR TREATMENT.

In pursuance of the policy of decentralisation, the Minister of Pensions has entrusted to the Commissioners of Medical Services in the various regions of the Ministry the responsibility of obtaining for disabled officers and nurses the medical or surgical treatment to which they are entitled under the Royal Warrant. A discharged officer or nurse who is claiming retired pay or pension on the ground that he or she is suffering from a disability which is either attributable to, or aggravated by, service, and who is in need of treatment for the disability, should also make application to the Commissioner of Medical

## IRISH NURSES' ASSOCIATION.

The annual business meeting was held on Saturday, the 6th inst., at 34, St. Stephen's Green, Dublin, and the report was adopted. It was decided to summon a general meeting for April 3rd to present it.

Fourteen new members were elected.

We hope Irish nurses will now rally in great force to their pioneer Association, which has faithfully furthered their professional interests for so many years. A strong and united association of professional nurses in Ireland is more imperative than ever now that State Registration is an accomplished fact, and the association, which inaugurated and promoted the reform, is the body which has proved its mettle.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

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## THE HYGIENE OF THE MIND.

SUMMARY OF LECTURE GIVEN BEFORE THE ASSOCIATION OF TRAINED NURSES IN PUBLIC HEALTH BY MISS ISABEL MACDONALD, SECRETARY OF THE ROYAL BRITISH NURSES' ASSOCIATION, AT 10, ORCHARD STREET, W., FEBRUARY 28TH.

The Lecturer, in commencing, said that she would not enter upon the subject of the effects of fresh air, food, &c., upon the healthy functioning of the mind, as her audience knew probably more of this than she did.

### THE NURSE'S NERVOUS SYSTEM.

Referring to sleep the lecturer said:—

"My attention is drawn to this in particular because I see how very frequently nurses in private work curtail their hours of sleep, and account it a virtue to do so. I think you will agree with me that it is more often the nurses' nervous system that is overstrained than their physical—that the condition of the brain and nervous system exercises a wonderful influence upon the physical. When a nurse or any other worker begins to curtail the hours of sleep it may almost always be assumed that she is not capable of the output required of her, and it invariably follows that she loses her self-control, or at least loses a healthy, sane outlook upon the facts and duties of life as they exist. All too often, owing to the curtailment of her hours of sleep, she becomes, to a certain extent, a vampire upon the vitality of others whose lot it is to work with her. It is only in sleep that she can collect a sufficient reserve of that finer, higher vitality that is necessary in all branches of a profession such as ours. For the lack of it the nurse's brain is too often apt to become a mass of bad habits leading to loss of self-control, loss of power for clear thinking, for self-dependence, and for any ability to make full use of the powers and possibilities with which nature may have chosen to endow her. This question of balance brings us to another aspect of our subject, and that is the need for finding a proper equilibrium, if I may so express it, not merely as regards work and rest, but for finding the equilibrium in all you undertake. I think Goethe it was who defined evil as "delayed good"—a very philosophic sort of definition, you will allow. I believe, however, that evil is often a superabundance of

good in one particular direction, and I hope it will not be laid to my account that I am fostering selfishness and prejudicing the traditions of our nursing profession when I say that often nurses suffer, and their patients suffer, from the lack of a healthy ability on the part of the nurses to take care of themselves.

### TWO CLASSES OF NURSES.

There are really two classes of nurses. You find in one class the nurse who will give of her sympathy, her service, and her strength up to the very limit of her endurance, and, for a time, this works well; she is much beloved, much sought after, but, at last, though her sympathy with the suffering may never fail, she finds herself bankrupt of endurance, and therefore of the power to give service. Her overflowing goodness has wrought evil, for it has prematurely deprived the sick of a woman whose whole aspiration is for their health. Therefore, while I would desire that every nurse should give good measure of her strength and all her skill to her patients, I would still hold that she should observe a certain temperance, too, in the matter of giving, and that often, unnecessarily, a good nurse has taught people the habit of living on the vitality of herself and others—a habit which it is extraordinarily easy to acquire. Then there is the other class of nurse to whom Goethe's definition of evil might better apply—the nurse who, often quite subconsciously, rears up her own defences by curbing unduly her sympathy, by being perpetually on the watch that her patient does not exact more than the pound of flesh, and one of this class too often establishes undesirable characteristics, such as habits of egoism, selfishness, and introspection, habits as hurtful to mind and character as those which result from the poverty of mental and nervous vitality that arises in the nurses of the first class I mentioned.

### CONTROL OF THE MIND.

Another feature in mental hygiene is the necessity for acquiring a certain control over the mind, and I do not refer here only to control over the emotions, although such control is right and important; I mean the power to control the mind just as you control certain physical actions. Just cast back your mind over the hours of a single day. Think of the thousand and one ideas, thoughts, and

superficial impressions that have floated through it and absorbed its energies to little or no purpose. Try to make the mind concentrate for, say, twenty minutes, to think on one single subject to the exclusion of all others, and you will find how difficult this is. In the early days of the world's history seers and sages realised that they must master that organ, the brain, and we find that in most of what we might call the schools of theology, philosophy, and in the so-called mystery schools of those olden days certain definite times were set aside each day for exercises in concentration and meditation. In modern days such exercises would be regarded as a sad waste of time, but it is undoubted that they must have tended not only to increase mental capacity, but also that they gave a certain anchorage to the mind which led to a finer mental balance, a saner and broader outlook, and a greater control over the emotions, whilst also preventing the formation of such pernicious habits as worrying, scandalmongering, and unhealthy, neurotic introspection."

#### CHEERY OPTIMISM.

The lecturer next referred to the importance of every nurse having some hobby apart from her work, and to the effect of this as regards mental balance and the rest it gave to centres overstrained by the ordinary round of work. Continuing, she said: "Another very important point in regard to the hygiene of the mind is the cultivation of a cheery optimism and an ability to put one's whole self into every undertaking. I can remember once, while sitting by a window in St. Andrews, the great golfing centre in Scotland, I saw a white-haired, buoyant old gentleman approaching, carrying his clubs. His face was simply aglow with satisfaction, and one could not but wonder whether he had got news that he had received the O.B.E., been raised to the peerage, or won a bet on the Derby. He solved the riddle himself, for, as he passed by the window, I heard him say to his companion, 'I'm so glad I won that last hole.' All this happiness because he had 'won a hole,' and yet I could not help thinking that he approached with the same enthusiasm everything else in life—his business, his newspaper, and, maybe, his lunch. He was so perfectly happy, and yet it may have been that he had lost all the other holes; it did not matter—he had won 'that last.' Many of us would do well to imitate his lighthearted enjoyment in what we have achieved, instead of poisoning ourselves, both mentally and physically, by worrying over the holes we have lost, though we may not quite attain to the heights of optimism that characterised a certain dear old lady of some eighty summers who had only two teeth left, but was so glad they were opposite."

#### DISCUSSION.

In a lengthy discussion which followed, Miss Beatrice Kent said that it was desirable that a certain amount of mental nursing should enter into every nurse's training. Miss Kent also referred to the need for reformation in Mental Hospitals. Miss Macdonald, a member of the audience, said that

this did not refer to the Scottish Mental Hospitals, and Miss Kent agreed. Mrs. Furley Smith also said that in many such hospitals, particularly private ones, there was urgent need of reform, but she could not agree that all English mental hospitals were badly managed. She had been interested in a case treated in two mental hospitals. In the first she thought the conditions very bad, but the management of the second—Banstead Mental Hospital—left nothing to be desired. No words could describe the courtesy, kindness, and consideration which she had seen shown to the patients there. Miss Warriner spoke on the benefits arising from the practice of concentration and silence, Mrs. Campbell Thomson of the great difficulty which private nurses have in cultivating any hobbies owing to their conditions of work.

In replying to a vote of thanks, moved by Mrs. Earp, Miss Macdonald said that pressure of work had not permitted her to deal at all exhaustively with her subject, but if she could feel that she had made it to some extent relevant to conditions of life at the present time, and given food for thought or any pleasure whatever that afternoon, she would at least close another of these strenuous weeks in the happy consciousness of having won its last hole.

### THE PAGEANT OF THE EVOLUTION OF TRAINED NURSING.

The Secretary will be glad to hear from Members of the Corporation who will interest their friends in the Pageant of the Evolution of Trained Nursing, which is to take place on April 15th. There are many ways in which the nurses can help towards making it a great success, and those who are prepared to do so should communicate with us without delay. Each member might sell at least one guinea ticket, so as to cover the expenses.

We advise all nurses who can to be present at the Pageant themselves, to witness an unfolding in stately procession of the long history of their profession. The symbolism of those attributes which have caused it to be regarded as perhaps the highest vocation for women will form a very beautiful feature of the Pageant, while in a later section the costumes of knights and ladies of the Middle Ages offer ample opportunity for a very artistic rendering of the history of nursing as it existed in mediæval days. Not less varied, and probably not less picturesque, will be the section relating to modern nursing from the days of the immortal Sairey down to the present time.

#### ROYAL RED CROSS AWARD.

We congratulate Miss Annice Gray upon having received the Royal Red Cross. She was trained at the Royal Infirmary, Dundee, and before the commencement of war was a Member of the Staff of the Society of Chartered Nurses. She did splendid work later in military hospitals, both in England and abroad, and has now been appointed one of the School Nurses under the London County Council.

ISABEL MACDONALD,

*Secretary to the Corporation.*

10, Orchard Street, London, W.

## THE STAR CHAMBER AT 22, LANGHAM STREET, W.

A section of the "loyal" Sisters on the Staff of the Co-operation, 22, Langham Street, W., are evidently determined to stamp out all independence of thought and action upon the part of colleagues who differ from the present methods of management and to judge from the following letter which is being issued without a heading from the Office, their policy of persecution may be defined as the official policy as promoted in the publications of a founder Vice-President. The object of this referendum is, we learn, to remove three more nurses from the Staff.

22, Langham Street, London, W., is becoming recognised as a veritable "Star Chamber," and trained nurses who value their liberty of conscience and professional reputation will be wise to run no risks by joining the Nurses' Co-operation until this unjustifiable policy is abandoned. We are glad to know that the matter is to be thrashed out in a Court of Law. Working women cannot afford to suffer professional ruin without a protest.

### COPY OF LETTER AND CARD SENT FROM 22, LANGHAM STREET, W.

MARCH 6TH, 1920.

We the undersigned, feel that it is a danger to the Co-operation and an injustice to the Nursing Staff that we have still three Nurses on the Committee of Management, as our Nurse Representatives, who have taken part in, and helped to promote, the past Agitation.

We look upon their attitude as disloyal to the Co-operation and to their fellow-Nurses, and we call upon the Committee of Management to remove their names from the Co-operation.

Please say on enclosed card whether or not you agree with us.

M. BABB.	C. M. INGLEBY (Paid assist.
M. BATH.	J. OAKLEY. (at club).
B. C. DRAKE.	W. ORTNER.
C. GOLDIE.	L. TURNER.
M. HOOD.	F. YEOMAN.

CARD ENCLOSED :—

Do you agree that the Nurse Representatives who took part in the past agitation should be removed from the Staff?

Kindly say "Yes" or "No" above your signature.

Signature .....

Envelope addressed to :—

MISS GOLDIE,  
The Nurses' Co-operation,  
22, Langham Street, W. 1.

The nurses at Glenvera private hospital, Cork, had an alarming experience on March 5th, when their sitting room was raided by armed and masked men, who relieved them of their money and valuables, and on being told that the nurses were Sinn Feiners, insisted on their singing "God Save the King." The following day the nurses' possessions were returned to them with a note: "We do not want to take these things from poor nurses."

## APPOINTMENTS.

### LADY SUPERINTENDENT.

**Royal Alexandra Children's Hospital and Convalescent Home, Rhyl, N. Wales.**—Miss Alice E. Bright has been appointed Lady Superintendent. She was trained at the Queen's Hospital for Children, Hackney Road, London, E., and has been Staff Nurse at Sussex County Hospital, Brighton, Sister and Night Sister at the Jenny Lind Infirmary for Sick Children, Norwich, and Sister for nine years at the Royal Alexandra Hospital, Rhyl.

### MATRON.

**Isolation Hospital, Winchmore Hill.**—Miss Janet McFadyen has been appointed Matron. She was trained at the Leith Hospital, Edinburgh, and the Ruchill Hospital, Glasgow, and since 1914 has been Assistant Matron at the Cancer Hospital, Fulham Road, S.W.

**Disford Industrial School for Boys, Leicester.**—Miss E. M. Pickard has been appointed Matron. She was trained at the Hertford County Hospital.

### ASSISTANT MATRON.

**City of Westminster Union Infirmary, S.W.**—Miss Beatrice J. Peters has been appointed Assistant Matron. She was trained at Erdington Infirmary, Birmingham, and held the positions of Ward and Theatre Sister and Maternity Sister there. She has also been Superintendent Nurse at Poole Infirmary, and at the County Hospital, Guernsey, and Night Sister and Home Sister at the City of Westminster Infirmary.

### NIGHT SISTER.

**Royal Infirmary, Wigan.**—Miss S. A. Eddy, has been appointed Night Sister. She was trained at the Royal Infirmary, Sheffield, and has been Sister of Medical, and Women's Surgical Wards at the Royal Infirmary, Wigan.

### HEALTH VISITOR.

**Borough of Shrewsbury.**—Miss Beatrice Sanderson has been appointed Health Visitor. She was trained at the Union Infirmary, Oldham, and has been Staff Nurse at North Staffordshire General Hospital, and has done war nursing at home and abroad.

## WEDDING BELLS.

—Many of our readers who are acquainted with Miss Gladys Tatham, not only personally, but through her contributions to this JOURNAL, will learn with interest that, on February 20th, she was married, by special licence, to Mr. Firth Scott, with whose books some of them may be acquainted, as his name is well known in the literary world. Mrs. Firth Scott writes that her interests will ever remain deeply rooted in the professions of nursing and midwifery, even though she will no longer be an active member.

## CHAIRMANSHIP OF NATIONAL COMMITTEE ON RED CROSS NURSING SERVICE, U.S.A.

At the meeting of the National Committee on Red Cross Nursing Service held in Washington the early part of December, Miss Clara D. Noyes, was nominated as chairman of that committee. We have recently learned, says *The American Journal of Nursing*, that the executive committee of the American Red Cross has approved Miss Noyes' election. The Red Cross Nursing Service in America is professionally organised and a great example to this country where it is a society of socially influential persons with no practical nursing experience.



## THE PASSING BELL.

We regret to record the death of Miss Angelique Lucelle Pringle, best known in the nursing world for her work as Lady Superintendent of Nurses at the Royal Infirmary, Edinburgh, a position she held with distinction for fifteen years, during the later decades of the last century.

Miss Pringle was trained at St. Thomas's Hospital, in the Nightingale Training School for Nurses, and was honoured with the friendship of Miss Florence Nightingale. When, in the early seventies, the Managers of the Royal Infirmary, Edinburgh, who realised the urgent need of the reorganisation of their nursing and domestic departments, applied to the Nightingale School for a Lady Superintendent of Nurses, and several highly qualified nurses were sent to Edinburgh as candidates for the post, Miss Pringle was selected to fill the position, at the early age of 27, and did so with conspicuous success. The removal of the patients from the old to the present Infirmary in 1879 was a test of her organising ability, and was very successfully carried through. She was not only an efficient administrator, but a charming personality, at once firm, gentle, and loveable.

After fifteen years' service at Edinburgh Miss Pringle was recalled to St. Thomas's Hospital as Matron, but resigned after a brief tenure of office, owing to her reception into the Roman Church. Even those who regret her action will realise her sincerity of purpose, for there are comparatively few women in these self-seeking days who would resign the position of Matron of St. Thomas's Hospital and accept posts of lesser importance for conscience sake. When, therefore, we meet with one who has sacrificed material things in obedience to the promptings of her spiritual nature, let us respect and honour the impulse.

Miss Pringle died at Musselburgh, on the Firth of Forth, leaving an honourable record as a pioneer in nursing reform, and as a gracious and honourable gentlewoman.—R.I.P.

## IN THE EARLY EIGHTIES.

The Editor of this JOURNAL well remembers her first interview with this charming woman. It was in the early eighties. When in Edinburgh she called upon Miss Pringle, at the Royal Infirmary, Edinburgh, and was ushered into her office.

"Take a chair," she said, smiling. "Do you wish to enter for training?"

We smiled also, and explained we were Matron of Bart's.

Then we had a hearty laugh together.

"Oh, what a pity!" said Miss Pringle; "I should like you for a probationer."

"It is," we replied; "I should like you for a Matron."

Miss Pringle attended several meetings on Registration in the early days of its inception, but the Bonham-Carter and St. Thomas's influence were dead against it, so she dropped out; but she was always kind and tolerant in discussing what were, in those far-off days, considered Bolshevik propensities.

## WHERE IS THE MONEY TO COME FROM?

In reply to our enquiry as to whether the College of Nursing is to be erected with money collected from the public for the sick and wounded, Sir Robert A. Hudson, G.B.E., Chairman of the Joint Finance Committee of the British Red Cross Society, and the Order of St. John of Jerusalem in England, writes: "The project to which you refer is not being financed from the Joint Fund of the British Red Cross Society and the Order of St. John."

We made the enquiry because of the following statement in the sixth annual report of the Executive Committee of the Carnegie United Kingdom Trust submitted at Dunfermline on February 25th. After stating that the Trust had promised a grant of £40,000 for the erection or purchase of an institute in connection with a Central Council of Infant and Child Welfare, established through the efforts of the Hon. Sir Arthur Stanley, Chairman of the British Red Cross Society, the report continued:—

"Since the Trust's offer was made to the Council, the Red Cross Society have proposed to erect, or purchase, a very large building which would house the following activities:—(a) V.A.D. and Red Cross work; (b) a tuberculosis centre; (c) a college of nursing; (d) the central welfare work for which the Trust's grant would be available. The executive committee have agreed to this proposal on condition that a distinct wing is provided for the purposes of the Central Institute."

## DOWN WITH DOLES.

It is some satisfaction to know that after ignoring the War Charities Act for some weeks, the *Daily Telegraph* has been compelled to conform to it, and insert the announcement daily that its fund for "Our Nurses" is "Registered under the War Charities Act, 1916."

The Editor of the *D.T.* republishes daily quotes from the employers' press, such as the *Nursing Mirror*, and *Hospital*, both edited by a late Financial Secretary of the Stock Exchange, who can no more claim to represent nursing opinion than can *Tit-Bits* or a penny novelette!

A public-spirited nurse who remonstrated with Lord Burnham for his intolerable patronage of her profession received an answer to the effect that nurses need not resent the *D.T.* appeal as Lord Haig was begging for needy officers. We hope this lady replied that Lord Haig is not appealing for Shilling Doles from the rank and file of the Army and Navy for their officers, as Lord Burnham is doing in the name of professional nurses. But apparently any sort of dole is good enough for the "hired nuss." It is amazing that several of the so-called leading training schools should take the lead in this most offensive charity campaign. It will surely take the General Nursing Councils some time to raise Nursing from the invidious position it has been placed in by the College of Nursing, Ltd., and to eliminate this deplorable spirit of almstaking from its members. We greatly hope, if ethical standards are defined, that begging from patients and the public generally will be distinctly forbidden.

## EDITH CAVELL MEMORIAL.

Queen Alexandra will unveil the Edith Cavell Memorial in St. Martin's Lane on Wednesday, March 17th. Amongst those present will be delegates from Belgium, and it is anticipated that many members of the nursing profession will attend.

## THE HOSPITAL WORLD.

We are glad to learn that the Bazaar organised by the Women's Guild of St. Bartholomew's Hospital, in aid of the funds of that institution has been a huge success. On Thursday, March 10th, Queen Alexandra, Princess Christian, Princess Beatrice, Princess Arthur of Connaught, and other royal ladies honoured the Bazaar by their presence. They were received by the Viscountess Sandhurst, the Rev. R. Moseley, chaplain, Mr. T. Hayes, clerk to the governors, and presumably the Matron. So successful was the bazaar that it was carried on for a second day, when the proceeds reached the substantial sum of £2,500 upon which all concerned are to be congratulated.

## LEGAL MATTERS.

*The Times* has published some interesting details concerning the trial of Edith Cavell, compiled from the principal documents of the trial, placed at its disposal by a political German personage, including the Court-Martial findings and the Execution Order.

### A DANGEROUS CRIMINAL.

At Durham Assizes, on March 3rd, Helen Aileen Sinclair, described as a nurse, was sentenced to three years' penal servitude and five years' preventive detention for theft. The prosecution stated that since 1906 she had been engaged in a life of crime, bigamy, arson, theft (including the theft of a nursing certificate, on the strength of which she obtained many appointments) and other crimes are recorded against her. At Edinburgh she stole a cap, hood and gown, and represented herself as an M.A. (under another alias, if we are not mistaken). Happily for the future when this criminal poses as a trained nurse, the public will have the protection of the State Register.

## OUTSIDE THE GATES.

The Royal College of Surgeons of Edinburgh has resolved to admit women to the Fellowship of the College on the same conditions as men. Edinburgh has always been in the forefront in regard to the recognition of the rights of women to admission to the medical profession.

Sir Archibald Edward Garrod has been appointed Regius Professor of Medicine in the University of Oxford, in the place of the late Sir William Osler.

## PREVENTIVE PRECAUTIONS.

At the present time, when we are threatened with an epidemic of influenza, it is wise to take reasonable preventive precautions.

### FORMAMINT.

In Formamint—a mouth and throat disinfectant in tablet form—we have a valuable prophylactic against infection.

### SANATOGEN.

In Sanatogen we have an easily assimilated tonic food which is both an energiser of the nervous system, and a body building nutrient.

### GENATOSAN., LTD.

The fact that these are the products of Genatosen, Ltd., the British purchasers of the Sanatogen Co., 12, Chenies St., London, W.C. 1, is a guarantee of their high standard.

It is rational in endeavouring to keep in good health (1) to use a mouth disinfectant, and (2) to maintain the physical condition at a high standard. The use of Formamint to attain the first object, and of Sanatogen to attain the second will go far in the promotion of these ends.

## VISIT THE SHOWROOMS.

Those interested in the equipment of hospitals and kindred institutions, and trained nurses and certified midwives requiring appliances in Liverpool, and the large centre which it serves, should make a point of visiting the showrooms of Messrs. White & Wright, of 93, Renshaw Street, Liverpool, who have probably the largest and most varied assortment of aseptic hospital furniture and nursing requisites in the provinces, as well as midwifery bags, and accessories of every description.

A point to be noted in connection with this firm is that they are not merely dealers in hospital equipment, such as they have on exhibition in their extensive showrooms, but the actual manufacturers of practically every stock in this line; their works at the rear of their Renshaw Street premises being fitted with the most modern plant. This ensures two advantages to the customer, sound workmanship, and moderate prices.

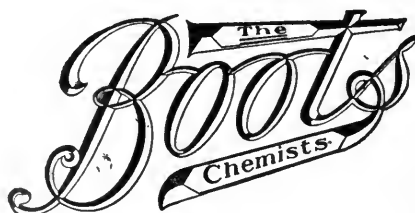
## HONOURABLE AND SUCCESSFUL BUSINESS.

Messrs. Charles Barker & Sons, Ltd., the well-known advertising agents, who have been established over 100 years, have, owing to expiry of the lease of their White Lion Court premises transferred their offices to 31, Bridge Row, Cannon Street, London, E.C. 4. The new telephone number is City 2163. We hope the firm of Messrs. Charles Barker will have another 100 years of honourable and successful business reputation in the new premises.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE IRISH NURSES' UNION.

A MANURE CART FOR MIDWIVES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—With reference to Miss Klaassen's letter in your issue of the 28th ult., may I say that the nurses reported to have gone on strike at the Carrickmacross Fever and General Hospital are not members of the Irish Nurses' Union? I do not know whether they are members of any other Union.

The strikes referred to in your editorial note were strikes by members of the Irish Asylum Workers' Union, and undoubtedly they did, in some cases, as at Clonmel, cause considerable distress to the inmates. At the same time, I think there is little room for dispute that these strikes would never have taken place if the governing authorities of the institutions had displayed anything approaching a reasonable spirit in dealing with their employees.

The Irish Nurses' Union has never ordered or advised its members to go on strike in the sense to which Miss Klaassen refers, but we have had a "strike" of a kind during the past week, which it may be instructive to report. It has been, for some time, the practice in the Dublin Union Hospital to require the nurse in charge of the admission ward at night to undertake the listing and checking of garments, &c., brought in by the patients admitted. This work is obviously not a nurse's work, and, as a matter of fact, it may on occasion, very seriously interfere with the due carrying out of the nurse's proper duties. We therefore brought the matter to the notice of the Board of Guardians, and as the Board seemed indisposed or unable to deal with the matter as speedily as was required, we advised one of our members to refuse to undertake this work in future, in other words, to go on strike. The result was that the nurse was dismissed, but in a couple of days we secured her reinstatement, and a definite understanding that the question as to who should do this work would be gone into. We have had considerable experience of the Dublin and other Guardians, and I have no hesitation in saying that, were it not for the "strike" should not have been able to secure so speedy and satisfactory an arrangement of the matter. This brings me to the suggestion I should like to make to Miss Klaassen and those who think with her. While I appreciate their feeling on this question, I think they are inclined to attach too much blame to the nurse who is driven to strike, or to threaten to strike, and too little blame to the authorities who are responsible for driving her to this extreme. I confess I doubt very much whether hospital and other nursing authorities, including Government

departments, would adopt the same dilatory methods and dictatorial attitude towards any other class of workers, who can go on strike without creating serious difficulty, as they adopt towards nurses, who practically cannot go on strike. In other words, I am not at all sure that the authorities do not take advantage of the nurses' devotion to duty.

It may be that on your side of the Channel nurses are held in greater respect generally than is sometimes the case here, but I may perhaps be allowed to give an actual illustration of the courtesy extended to a nurse by a member of the public authority employing her. A Poor Law Guardian in the Co. Meath sent for the Poor Law midwife to attend the wife of one of his labourers. The vehicle he sent to bring her to the labourer's house was a farm manure cart! I wonder would Miss Klaassen feel inclined to go on strike in such a case? The midwife concerned, of course, went to her patient, but not in the vehicle provided by the Guardian.

Yours faithfully,

M. MORTISHED,

Secretary.

29, South Anne Street, Dublin.

## KERNELS FROM CORRESPONDENCE.

*Irishwoman*: "I think it is a scandal taking Red Cross money to build the College when Haig and Beatty are calling out for money to relieve distress amongst the officers who sacrificed all to save England, it is a vile shame to take that money for luxuries for nurses. One feels as if all justice had gone out of Britishers."

[Sir Robert Hudson, the Hon. Treasurer of the Joint War Committee, denies that Red Cross money subscribed for sick and wounded is to be used for this purpose.—ED.]

*A "Loyal Sister"*: "I have noticed in the daily papers that Sir Henry Burdett is suffering from over-work, and has been ordered a complete rest by his doctors. As one of his own papers remarks, 'Those who were present at the meeting of the Nurses' Co-operation on February 6th, which he attended in spite of his doctor's orders, can hardly have realised from the vigour of his speech how seriously over-worked he was.' This is quite true; at the same time, some of us who were present were distinctly of opinion that later a reaction might set in, and change of air might be necessary!"

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*March 13th.*—How would you feed a baby, eight months old, after an operation for intussusception?

*March 20th.*—How would you prevent foot-drop, acute thirst, constipation and vomiting after an operation?

*March 27th.*—(a) Describe fully the varieties of Uterine Inertia; (b) What treatment would you adopt in each case?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### LIST OF SUCCESSFUL CANDIDATES.

At the examination of the Central Midwives' Board, held in London and the Provinces on February 4th, 1920, 656 candidates were examined, and 529 passed the examination. The percentage of failures was 19.4.

#### LONDON.

*British Hospital for Mothers and Babies.*—D. M. Clarke, M. I. T. Lewis, H. A. St. Aubyn.

*City of London Maternity Hospital.*—B. Batchelder, N. G. Bell, J. M. Cardozo, E. Hawksworth, M. M. Kilby, M. L. Lickman, E. Nettleton, M. Newland, I. L. Palmer, E. Rennie, M. Spray.

*Clapham Maternity Hospital.*—L. M. Campbell, J. Chrystal, G. A. Cross, L. E. Engel, S. J. Herbert, F. M. A. Jeffery, T. M. Malton, C. F. L. Murray, A. Tolmie, C. Wright.

*East End Mothers' Home.*—E. Beale, E. Brophy, J. Coulter, M. S. Dall, M. W. Gallant, M. Griffin, B. M. Haines, O. I. U. Lloyd, M. E. Murphy, M. R. R. Purkess, E. E. Shields, E. J. Thomas, T. Torpie, M. White.

*Elizabeth Garrett Anderson Hospital.*—J. F. W. Armstrong, M. Veitch.

*General Lying in Hospital.*—H. S. Auld, M. L. Blair, A. M. Boyd, D. E. Brett, H. Chilton, M. A. Eades, B. Evans, S. S. Gardiner, C. A. Hollé, M. Isaac, M. A. Jeffery, E. M. Johnson, A. Kasey, A. Langdale, S. Pachter, L. M. Pattison, M. A. Sowels, S. J. Spence, A. Tufnell, F. M. Wilson, W. A. Wilson, E. I. L. Wright.

*Greenwich Union Infirmary.*—J. W. H. Dowie.

*Guy's Institution.*—H. L. Croker, M. Day, M. F. Hughes, F. B. Sedgwick, H. M. Stebbings.

*Kensington Union Infirmary.*—L. E. Bassett, E. Morris, E. H. Muirden, K. V. M. N. Stephenson.

*Lambeth Infirmary.*—E. H. Lorimer, A. E. Rapson, B. Thomasson, F. H. Wheelwright.

*London Hospital.*—O. I. Cameron, L. M. Clemes, C. M. Hardy, D. M. Hoskins, M. E. Knight, A. E. Lister, B. T. Sparks, M. H. Ward.

*Maternity Nursing Association.*—K. F. Armstrong, E. S. M. Gaunt, W. M. Jones, L. R. Kimmons, H. M. Micklewright, L. M. Richards, P. Smith.

*Plaistow Maternity Charity.*—E. Blomberg, H. E. Brookshaw, M. A. Chambers, D. M. Chapman, E. Cox, L. Dimishky, E. K. Done, M. A. Houlston, G. E. House, M. James, M. E. Jones, W. L. Jordan, F. A. Keedwell, D. Laverick, A. L. Manning, C. Mason, M. A. Maude, A. Miller, B. Parry, M. Pickett, S. A. Powell, K. A. Prevett, L. R. Riggs, F. Robinson, V. M. Rogers, H. C. Simms, B. Skelton, H. Springfield, F. J. Stephen-

son, M. E. Tandy, H. E. Thomas, E. E. Thompson, A. G. Walker, F. E. Warren, M. A. Williams, O. L. Williams, F. L. Wisher, V. Wood.

*Queen Charlotte's Hospital.*—G. G. D. C. Anderson, C. L. Barker, A. W. Biles, V. E. Brotherton, M. H. Cochran, F. M. Cutting, D. Dixon, M. M. Draper, N. Downing, M. H. Dugdale, L. F. Dykes, G. K. Farmiloe, E. Forrester, B. E. Foster, B. M. Frame, M. J. G. Fullarton, G. M. Grevelink, F. E. Griffiths, J. D. Henry, M. R. Hill, M. Humphreys, E. A. Ivin, H. M. Jasper-Smith, B. G. W. Johnson, H. M. Jones, C. S. Maskell, G. M. W. Nash, E. K. Nye, C. N. Porter, L. F. Procter, E. E. Richards, G. A. Rubery, A. F. Thom, F. Tims, M. G. Varley, D. de L. Willis, M. Wright.

*Salvation Army Mothers' Hospital.*—D. E. Allmond, M. M. Christmas, E. B. Crowe, K. A. Gooding, O. M. Hardy, A. M. Hilton, B. E. Horscroft, A. M. Rasmussen, F. A. Williams.

*St. Bartholomew's Hospital.*—A. B. M. Owens.

*St. Marylebone Workhouse Infirmary.*—M. E. Morris, D. E. Varney.

*St. Thomas' Hospital.*—D. Geen, L. F. Kernaghan, N. C. Routh.

*University College Hospital.*—C. M. Beville, L. Hopkins, D. J. Storrar, E. A. Wintle.

*Wandsworth Union Workhouse.*—E. M. Mollet, C. Williams.

*West Ham Workhouse.*—G. B. Oddy.

*Whitechapel Union Infirmary.*—R. Holliday, M. A. Lord, C. Rees, M. A. H. Smith, E. Wardlow.

#### PRIVATE TUITION.

E. G. Bath, G. A. Beardsley, S. E. Boyden, T. C. Brown, A. R. Cassady, S. F. Davis, L. Firth, C. M. Gabbutt, D. E. Gardner, S. M. M. Grist, S. A. Hemsall, M. Hitherington, K. M. Hoare, J. M. Kemp, B. Leather, A. C. Liston, M. McPherson, G. E. Makin, M. D. Morwick, W. S. B. Poste, M. E. Vernon, A. Wild, B. A. Wootton.

#### PRIVATE TUITION AND INSTITUTIONS.

*Essex County Nursing Association.*—E. Allen, D. Healey, M. Hulf, M. G. Hunter, E. A. Leatherdale, S. E. Mann, E. H. Robinson, E. B. Watteau.  
*Jewish District Maternity Home.*—A. Bannerman, L. E. Godtschaik, F. Newton, J. Thomson.  
*Elizabeth Garrett Anderson Hospital.*—J. Bell.  
*Birmingham Maternity Hospital.*—L. Bennett, M. V. McKean, M. Raven.  
*Pemberton Nursing Institute.*—C. M. A. Campbell, A. C. Love.  
*Kensington Union Infirmary.*—G. D. Clark, M. F. Eyles, L. Lyall.  
*St. Mary's Maternity Hostel.*—J. M. Cracknell, M. Payne.  
*Fulham Midwifery School.*—E. M. D'Arcy, J. E. De Wiele, N. Foster, B. A. Granville, A. Powell.  
*Bradford Union Hospital.*—M. A. Fear.  
*General Lying-in Hospital.*—M. Gammon, M. A. McHardy, A. N.

Mackenzie, D. K. Oakley, D. M. Williams. *Christchurch Union Workhouse*.—P. E. Holbert. *Monmouthshire Nursing Association*.—S. A. Jones. *Liverpool Maternity Hospital*.—C. M. Macey, R. L. Matthews. *East End Mothers' Home*.—K. R. Morris. *Manchester St. Mary's Hospitals*.—H. G. Munslow, E. J. Richardson, M. Shepherd, S. J. Williamson, F. A. Witt. *Halifax District Nursing Association*.—M. Tyson. *Stoke-on-Trent Union Hospital*.—E. L. Armitage.

(To be concluded.)

## CENTRAL MIDWIVES' BOARD FOR SCOTLAND.

### PENAL CASES.

A meeting of the Central Midwives' Board for Scotland was held at the offices, 49, Lauriston Place, Edinburgh, when a number of Penal Cases were considered, with the following results:—

*Struck off the Roll and Certificate Cancelled.*

ELIZA DEWAR (No. 2348).—Convicted in the Police Court, Perth, of keeping an improper house, and fined 40s., with the alternative of 20 days' imprisonment. This midwife was also charged with further breaches of the rules.

ANNIE LOWE (No. 1193).—Charged with failing to make the required notifications after contact with a case of puerperal fever; also of failing to take the necessary precautions, whereby other patients were affected.

*Sentence Postponed.*

JANET DUNCAN (No. 692).—Charged with failure to notify Ophthalmia Neonatorum, and with other breaches of the Rules. The Chairman intimated that such offences could not be adequately dealt with by censure, or caution, but before proceeding to the extreme penalty of removing the midwife by name from the Roll it had been decided to give her an opportunity of proving amendment. Sentence was therefore postponed, and the Local Supervising Authority would be asked for a report at the end of three months on her conduct and methods of practice.

*Severely Reprimanded.*

MARY NICOL MARTIN (No. 1773) was severely reprimanded for failing to notify still-birth, and other breaches of the Rules. In regard to charges consisting of failure to keep Register and Temperature Charts, the Board adjourned judgment and requested the Local Supervising Authority to furnish a report within three months on the conduct and methods of practice of the midwife.

*Suspended from Practice as a Midwife.*

MARY MURPHY (No. 555) was suspended from practice as a midwife for three months for failure to notify Ophthalmia Neonatorum, whereby the child's eyes were permanently injured, and for other breaches of the Rules. The Local Supervising Authority was instructed to report thereafter

with reference to her ability in the taking and recording of temperature and pulses.

The power to suspend a midwife for malpraxis is conferred in the Central Midwives Acts for Scotland and Ireland and in the Midwives Act Amendment Act for England and Wales.

The Secretary was instructed to remove the names from the Roll of Midwives, and to cancel the Certificates of

ELIZABETH PATERSON (No. 1427), sentenced to six months' imprisonment for theft and fraud;

MARY DRUGAN (No. 796), sentenced to eighteen months' imprisonment for using instruments with intent to procure abortion.

### BABIES OF THE "NEW POOR."

The Queen paid a surprise visit to the Babies' Hotel and Nursery Training School at Glebe Place, Stoke Newington, on Saturday last, when she expressed her satisfaction with all she saw, and hoped that funds would be forthcoming to carry on the work. The Hotel, which owes its inception to a donation from the American Red Cross, and is managed by a joint committee of the National League for Health, Maternity, and Child Welfare, and the National Society of Day Nurseries, is for children whose mothers are of the educated classes, and have to earn their own living. Children are received from birth to school age.

### A NIGHT MEDICAL SERVICE IN PARIS.

The *Lancet* states that M. Roux, Prefect of Police, has just issued an order concerning the reorganisation of the medical service in Paris at night. There is to be a service of 30 doctors appointed by the Prefect. The duration of their appointment will be three years at the most, with fixed annual pay of 3,000 francs, and the sum of 50 francs for each night of actual work to the five medical men detailed as substitutes. Paris is divided into five sections, in each of which a doctor is permanently on duty from 10 p.m. till 7 a.m., from October 1st to March 31st, and from 10 p.m. to 6 a.m. from April 1st to Sept. 30th. The site of his activities is to be a central police station, where a room containing a bed will be available. The call for the doctor will be made to the nearest police station by the patient; thence a telephone message will be sent to the chief of the municipal police, who will send a motor-car to take the doctor to the patient and then on to the medical station. Each car is furnished with a case containing urgent first-aid appliances such as dressings, cachets, ampoules, and a small collection of syringes and sterilised instruments. The medical service is so organised that the turn of each doctor comes round once in six days. The labour cases will be catered for by the midwives attached to the night medical service, and the tariff for their visits is fixed as follows: simple visit, 15 francs; simple labour, 35 francs; twins, 60 francs. If a midwife has to resort to a doctor for help she will be able to requisition his services, on the lines indicated above.



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## EDITORIAL.

### A GREAT PUBLIC SERVANT—A LOSS TO THE NATION.

The death, after a few days' illness, from bronchial pneumonia, of Sir Robert Morant, K.C.B., Chief Permanent Secretary of the Ministry of Health, is a great national loss, for, by years of patient study, in which he brought his brilliant mind to bear upon the many difficult questions with which it would be confronted, he had a wide insight into the problems of National Health; he had the vision which realised what organization was necessary for the fulfilment of his ideals, and the high sense of duty, the force, and the indomitable will that would have carried them through.

Like other men of genius, he held that "no detail is ever insignificant," and that, no doubt, had much to do with his success. Thoroughness, understanding born of knowledge, devotion and faithfulness to principles and to his duty as a public servant, characterised his work, and he has left behind him a noble tradition of public policy and conduct which may well be an inspiration to those who follow him.

The public loss is also, in a very special sense, the loss of the nursing profession. Last year, during the passage of the Nurses' Registration Bills through Parliament, three men of outstanding ability filled the horizon: Major Barnett, who had charge of the Central Committee's Bill; the Right Honble. Christopher Addison, M.P., Minister of Health, who undertook to introduce a Government measure for the State Registration of Nurses, and carried it through with such conspicuous ability; and Sir Robert Morant, his Chief Permanent Secretary, never far away when the Bills were under discussion, who took infinitesimal pains, and gave unwearied service, in endeavouring to find the best solution to points which arose during

their passage through the House of Commons, and his dealings with those concerned, in Conferences and elsewhere, were characterised by the greatest courtesy and kindness.

It will be remembered that Dr. Addison, in his speech at the General Meeting of Members of the Society for the State Registration of Trained Nurses on January 8th, replying to a vote of thanks, said:—"Although it is exceptional to mention Civil Servants . . . the major part of the departmental work I saddled on the broad shoulders of Sir Robert Morant." We offer to the Minister of Health our sincere sympathy at the loss of so able and loyal a colleague.

The strength and the wisdom of Sir Robert Morant lay in the fact that he studied the questions which concerned his work at first hand. He realised that trained nursing would be one of the important factors in the work of the coming Ministry of Health, and it was quite usual for him to appear at meetings of nurses, keenly interested, quietly making his own deductions, long before he became so intimately concerned with nursing legislation, and this was his considered policy in all that concerned his work.

As a public servant he studiously avoided taking any partizan attitude, and held aloof even from any suspicion of it. He was approachable by those of diverse views who were concerned with any matter under discussion. Thereby he acquired his knowledge of all sides of a question, and when he acted, or advised others to act, his opinion had been formed after close study of its various bearings, so that his advice was of value.

The *Times* truly says of him:—"He was a great Civil Servant, and his whole life was inspired by devotion to the public service. . . ." "Night after night, of recent years, he worked till the small hours of the morning, organizing

and planning on behalf of the Ministry of Health, which was largely his own creation, and to which he devoted himself heart and soul. These long hours and the strain they involved undoubtedly wore him out. He has died, as he would have wished, a martyr to one of the strongest senses of duty which our public service has known."

## MEDICAL MATTERS.

### DENTAL CHANCERE.

The danger of infection which may occur from unsterilised dental instruments is illustrated by a case of syphilitic infection reported by Dr. Herman Goodman, of New York, in the *New York Medical Journal*.

The patient was an American officer, 32 years of age, who was married, and had two healthy children. Ten to fourteen days after extraction of a tooth by a civilian dentist an ulcer appeared at the site of the extraction. A Wassermann reaction taken at the time proved negative, and the ulcer healed under local treatment, but recurred. Six weeks later there was generalisation of the syphilitic infection, shown by inflammation of the jaws, and ulceration about the right molars, bilateral swelling of the sub-maxillary glands, pharyngitis, and a positive Wassermann reaction. The symptoms disappeared, and the Wassermann reaction became negative, after three doses of arsenobenzol.

### MANICURE INFECTION.

The practice of manicure is increasing, and the serious warning given by Dr. Körbl, a Viennese surgeon, in *Wien Klin Woch* and reported by the *British Medical Journal*, therefore deserves attention. Dr. Körbl reports no fewer than 32 cases of infection, some of them very alarming, resulting from this practice. In most of them the infection led to severe inflammation, requiring prolonged treatment, and produced more or less serious functional disturbance. Most of his patients did not consult him till conservative treatment had failed, and even free incision had proved incapable of limiting the disease. Dr. Körbl is of opinion that in practically every case the disease began as a subcutaneous whitlow. In three it began in the finger tips; in all the others in the tissues near the nail. He considers that every step in the practice of manicure is liable to produce infection. First the protecting epidermis is opened, and the thin film connecting the base of the nail with the skin is incised and trimmed.

Then, in the act of polishing the nail with pastes and powders, micro-organisms which have gained access to the subcutaneous tissues are securely sealed in. Finally, the manicurist massages and polishes the nail, driving the infectious material deeper into the lymphatic system. Examination of the pus showed that the staphylococci usually associated with whitlow were seldom present, and in most cases the infection was mixed. The most prevalent micro-organisms were streptococci and anaërobic bacilli. Colon bacilli, as well as influenza bacilli, were also comparatively common. In four cases, three of which developed erysipelas, streptococci were found in pure culture. Infection may occur during the manicuring or afterwards, but the primary infection is thought to be by far the most important. In a family of four persons all used the same manicure instruments, but in only 9 of the 32 cases had the patients manicured themselves. All the others, including the patients with erysipelas, had been treated by professional manicurists. No cultures could be obtained from the instruments, which had probably been cleaned with alcohol, but the paste employed yielded pure cultures of streptococci. The writer concludes his case against manicure with a reference to the possibilities of the conveyance of tuberculosis and syphilis to those who practise it.

### SYPHILIS IN CHILDHOOD.

Dr. Leonard Findlay, Physician to the Royal Hospital for Sick Children, Glasgow, has, in a book of the above title, given us a most useful and practical account of this disease.

It is interesting to note that Dr. Findlay holds the opinion that no anti-venereal campaign will be successful without notification of the disease, and he believes that sooner or later this course will be adopted. He is of opinion that marriage may be permitted when a negative Wassermann reaction has been obtained after early and thorough treatment with salvarsan and the reaction has remained negative for a year. He regards inunction as the most efficacious method of administering mercury, and has frequently seen children treated with mercury and chalk, without any benefit, respond immediately to inunction with mercury ointment, and has continued this treatment for a year without seeing evidence of toxæmia.

Dr. Findlay is of opinion that salvarsan—which he considers indispensable in the treatment of children with syphilis, in combination with mercury—should never be given to infants intramuscularly or subcutaneously if these methods can be avoided.

## NURSING ECHOES.

On March 13th Her Majesty the Queen visited Queen Mary's Hostel for Nurses, at 194, Queen's Gate, Queen Mary's Emergency Hostel, at 71, Lexham Gardens, and the Imperial Nurses' Club, Ebury Street. The Queen is greatly interested in the housing and comfort of demobilised women, and at the emergency hostel she remained to tea, and discussed at length with the committee what steps could be taken to provide further accommodation for the increasing number of girls of the educated class who are now compelled to come to London to earn their living or to look for posts. The large training schemes now being inaugurated for girls who have been for the past few years on war work are being hampered by the want of accommodation for them near the training centres.

The annual meeting of the subscribers to the Queen's Fund for the maintenance of Queen Victoria's Jubilee Institute for Nurses was recently held at 58, Victoria Street, S.W. Lieut.-General Sir W. L. Gubbins presided.

It was reported that during the year 1919 nearly £8,000 had been collected for the work of the institute. The Chairman explained that part of the money had been provided by the sale of securities, and the expenditure of the institute for 1919 exceeded the ordinary income by over £4,000. The estimated expenditure for 1920 exceeds the estimated income by £5,000.

The Rev. Archibald Fleming, D.D., Mr. Edwin Tate, and Mr. W. Ward Cook were appointed to represent the Fund on the council of the Institute, and Lady Northcote, C.I., and Lady FitzGerald were appointed representatives of Queen Alexandra's Committee, which committee, under the presidency of Lady Northcote, undertakes to provide £2,000 a year for the work of the institute.

We are pleased to learn that the Trained Nurses' Annuity Fund, now combined with the Benevolent Funds of the Royal British Nurses' Association, has had a very prosperous year. The Report and audited accounts may be expected at an early date.

The Countess of Lytton presided on the 9th inst. at the annual meeting of the Governors of the Elizabeth Garrett-Anderson Hospital, Euston Road.

Lady Lytton announced that the hospital had been enlarged by the gift from Sir Alan Garrett-Anderson of an adjoining house, and

that in view of this additional accommodation the Matron, Miss Hale, hopes to arrange an eight-hour day for the nurses.

The Garrett-Anderson Hospital is exclusively for women and children, and the staff, including doctors and surgeons, is made up entirely from the female sex.

We are pleased to know that the salaries of the Nursing Staff, including that of the Matron, at the Queen's Hospital for Children, Hackney Road, have been raised as follows:—Assistant Matron, £90; Sister in Charge, Bexhill, £90; Home Sister, £75; Night Sister, £70; Ward Sisters (old), £65; Ward Sisters (new), £60; O.P.D. Sister, and Theatre, £60; Massage (half time), £75; Staff Nurses, £50; Probationers, £20, £25, and £30.

The standard of mental nursing must be carefully watched by trained nurses, and the care of male patients by women is one that they should advocate in season and out of season, if there is to be improvement in the condition of many curable cases. Nursing of the highest quality is woman's work, and we must help those progressive medical men in care of mental hospitals who realise this, and who are anxious that the patients under their care shall have the benefit of it.

Sometimes an editor, grinding to instruct those who do not wish to learn, feels inclined to drift with the stream, but this is not permissible in a professional nursing journal, as one never knows where seeds bear fruit.

For instance, in our issue of the 6th inst., we expressed our editorial opinion on the nursing care of the insane, in warm sympathy with the efforts of Professor G. M. Robertson, of the Royal Edinburgh Asylum, in his progressive and sympathetic treatment of male patients at that institution, and now we have the gratification of knowing that that article was brought to the notice of the Visiting Committee of the Cardiff City Mental Hospital on March 11th, when the following resolution was adopted, when considering certain allegations made by a few male attendants of the Hospital, with a view to disparaging the nursing of male mental cases by female nurses:—

"That this Committee, having heard such evidence as was submitted with reference to various charges made by some of the attendants to the Cardiff Trades and Labour Council, as set out in their communication of February 26th, are satisfied that such statements are altogether exaggerated and unjustifiable, and are convinced of the superior advantages of

nursing by women in the interests of the patients."

We are not opposed to male attendants for certain cases—they are necessary; but for the care and cure of diseases of the brain the trained woman's touch is necessary—and very specially fine women at that.

A sum of £1,250 damages was awarded in the King's Bench Division to Miss Ethel Spicer, a nurse, of 8, Borkall Road, Catford, for personal injuries caused through being run down by a Ford motor van driven by Miss Violet Isabella Hood, a Royal Air Force driver.

It was stated the accident could not have been avoided, and the driver herself was rendered unconscious.

With every circumstance of honour the Edith Cavell Memorial in St. Martin's Place, W.C., was unveiled by Her Majesty Queen Alexandra, on Wednesday, March 17th. Amongst those present were General Dr. Maurice Funk, Mlle. De Meyer, Matron, and Nurse Andry, delegates from the Edith Cavell Nursing School at Brussels. A cord attached to the Union Jack and the Belgian Colours veiling the statue was handed to Queen Alexandra by the sculptor, Sir George Frampton, R.A., and simultaneously Miss Monk, Matron of the London Hospital, and Miss Beadsmore Smith, Matron-in-Chief Q.A.I.M.N.S., pulled cords on either side, the flags fell away, and the figure of Edith Cavell stood revealed.

### SCOTTISH NURSING NOTES.

Miss Maude MacCallum will speak at a Mass Meeting, convened by the Professional Union of Trained Nurses, on Friday, 19th March, at the Scottish Nurses' Club, 205, Bath Street, Glasgow, where a very successful Meeting was recently held, to place the principles of Trade-Unionism before trained nurses.

A correspondent writes:—A good deal of feeling has been aroused amongst nurses in Edinburgh, who think the new Club should, like that at Glasgow, be free to all trained nurses. The application for rooms is answered by a request to the applicant to join the College of Nursing, Ltd., together with an application form, which may or may not be accompanied by particulars of the accommodation required. If the "fish" is not landed at the first throw, another letter will be sent about the accommodation, with a reminder "that it is cheaper if you are a College member."

It is interesting to learn that during the recent Argyllshire election nursing questions cropped up, and several nurses took an intelligent interest in it. Councillor Rosslyn Mitchell criticised severely the attempt made by a medical member of Parliament to have semi-trained women registered, during the discussion of the Nurses' Bills in the Commons, for work in outlying country districts in the Highlands and Islands. He claimed rightly that in such districts, where the doctors are few and far between, the nurses should be highly trained women, with accurate theoretical knowledge, able to act in cases of emergency and difficulty, and this village nurses with a few months' experience were not able to do, and that the only reason for supplying the poor with semi-trained women was that they were *cheaper*.

The question of the 48-hours Bill as it affects nurses was discussed at another meeting between a trained nurse and the speaker, Miss King; incidentally the latter also referred to V.A.D.'s, who she thought "had been very hardly dealt with." Miss King was also of the opinion that "V.A.D.'s could be of great assistance to the District Nurse." In reply to the question, "In what way?" she said, "In making beds." This gave the trained nurse an excellent opening on the importance of trained observation of the patient while making the bed, and the toilet. This nurse sends us the following observations, with which we agree. She writes:—

"A nurse's work is not only carrying out doctors' orders, but it is *preventative*. We cannot treat our patients (nervous or not nervous) like a piece of Dresden china, or piece of carving, and examine any part just when we feel like it; and but for the opportunities bed making gives us, especially in the district, of a bold glance and touch here, and a surreptitious glance there, marks from internal or external causes, position in bed, especially of the lower limbs, in movements or lack of movements, and, most important of all, pitting of the feet or ankles, might remain unobserved. Why, my last patient, a private one, was a case in point. Very slight swelling appeared in the back of the ankles; medicine was changed, and my instructions from the doctor were that the condition of the patient's feet and ankles was to be my barometer in administering the medicine. Naturally I took a deeper interest in the comfort and tidiness of the lower part of the bed, and this is one of the opportunities the V.A.D. is to take from us! But for these opportunities in the district many symptoms would never be noticed in their earliest stages, and I for one would rather give up my district than submit to this 'help' from a V.A.D."

## HONOURS FOR NURSES.

At an Investiture at Buckingham Palace on March 10th, the King conferred the following Order and Decorations :—

### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE (Military Division).

Dame Commander.—Dame Sarah Oram, Queen Alexandra's Imperial Military Nursing Service (also received bar to the Royal Red Cross).

#### ROYAL RED CROSS.

##### THE ROYAL RED CROSS (FIRST CLASS).

Miss Catherine Renwick, Queen Alexandra's Royal Naval Nursing Service, Miss Isobel Whyte, Queen Alexandra's Imperial Military Nursing Service, Miss Mary Barrett, Civil Nursing Service, and Miss Ada White, Territorial Force Nursing Service.

##### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Royal Naval Nursing Service.*—Miss Alice Chirnside.

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Maude Wilkin.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Loretto Fogarty, Miss Florence Nice, Miss Alice O'Connell, Miss Thirza Robbins, Miss Muriel Rowe, Miss Jeanie Simon, Miss Adela Stones, and Miss Lilian Wass.

*Territorial Force Nursing Service.*—Miss Louisa Finlayson, Miss Annabella McLeod, Miss Annie McMillan, and Miss Margaret Moody.

*St. John's Ambulance Brigade.*—Miss Margaret Ballance, Miss Theresa King, and Miss Bridget Slevin.

*Voluntary Aid Detachment.*—Miss Winifred Beausire, Miss Annie Brawn, Miss Dorothy Lawson, Miss Alice Taylor, Miss Edith Usher, and Miss Edith Weston.

*South African Military Nursing Service.*—Mrs. Kathleen Ross.

The King conferred the following Orders and Decorations at Buckingham Palace, on March 12th :—

### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE (Military Division).

#### OFFICERS.

Matron Clara Ross, Australian Army Nursing Service.

#### ROYAL RED CROSS.

##### BAR TO THE ROYAL RED CROSS.

Miss Annie Baird, Queen Alexandra's Imperial Military Nursing Service Reserve, and Miss Margaret Alexander, Civil Hospital Reserve.

##### THE ROYAL RED CROSS (FIRST CLASS).

Miss Ellen Tate, Queen Alexandra's Imperial Military Nursing Service Reserve, Miss Katherine Fraser-Wood, Queen Alexandra's Imperial Military Nursing Service Reserve, and Miss Vera Spencer-Jones, Civil Nursing Service.

##### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—The Hon. Edith Littleton and Miss Cecile Parke.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Vera Blatchford, Miss Elizabeth Brown, Miss Eleanor Chambers, Miss Frances Denton, Miss Susan Hall, Miss Edith Mackenzie, Miss Doris Maltby, Miss Laura McAllan, and Miss Harriet McIlwain.

*Territorial Force Nursing Service.*—Miss Ada Bennett, Miss Beatrice Chadwick, Miss Katie Davies, and Miss Annie Hemmen.

*Civil Nursing Service.*—Miss Martha Andrews, Mrs. Millicent Battum, Mrs. Eleanor Chisolm, Miss Annie Cross, Miss Edith Day, 2nd Miss Ethel Swinton.

*British Red Cross Society.*—Miss Florence Bruncker, Miss Elizabeth Coates, Miss Ellie Davidson, Miss Dorcas Edwards, Miss Colleen Leedham-Fuller, Miss Rebekah Gunn, Miss Mary Johnson, Mrs. Jane Mackay, and Mrs. Leah Milner.

*St. John's Ambulance Brigade.*—Miss Ethel Maxwell.

*Civil and War Hospitals.*—Miss Elizabeth Knox and Mrs. Katherine Marden-Ranger.

*Voluntary Aid Detachment.*—Miss Catherine Adamson, Miss Muriel Adamson, Miss Muriel Addenbrooke, Miss Lillian Allen, Miss Margaret Blake, and Mrs. Rosa Cox.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service) was also received by Her Majesty.

### AWARD OF THE ROYAL RED CROSS.

#### (Second Class.)

The King has approved of the award of the Royal Red Cross Decoration to the following lady in recognition of valuable services in connexion with the war : Miss E. Hope, Nursing Sister, Q.A.R.N.N.S., R.N. Sick Quarters, Shotley.

The King has been pleased to award the Royal Red Cross to the following ladies in recognition of their valuable services in connection with the War :—

Miss M. A. Macdonald, Sister-in-Charge, Princess Louise Spec. Mil. Surg. Hosp., Chailey, Sussex ; Miss I. Mackenzie, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Ripon ; Miss M. Madigan, Assist. Nurse, Mil. Isolation Hosp., Aldershot ; Miss W. M. Martin, Matron, British Clearing Hosp., Rotterdam ; Miss M. I. Mason, Sister, T.F.N.S., 1st Western Gen. Hosp., Liverpool ; Miss M. McGregor, V.A.D. Nurse, 2nd Scot. Gen. Hosp., Craigleith, Edinburgh ; Miss C. McGovern, Sister, Endsleigh Palace Hosp. ; Miss J. McKinnon, Sister, Edinburgh War Hosp., Bangour, W. Lothian ; Miss C. McLaughlin, Assist. Nurse, The Lord Derby War Hosp., Warrington ; Miss J. McLean, Sister, Edinburgh War Hosp., Bangour, W. Lothian ; Miss S. A. Melody, Sister, Northumberland War Hosp., Gosforth, Newcastle-on-Tyne ; Miss F. Methley, Sister, Q.A.I.M.N.S.R., Wharnccliffe War Hosp., Sheffield ; Miss A. R. Moffatt, Sister, T.F.N.S., Spec. Mil. Surg. Hosp., Grangethorpe, Manchester ; Miss E. G. Moir, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Edinburgh Castle, Edinburgh ; Miss K. Moore, Sister, Q.A.I.M.N.S.R., the Mil. Hosp., Endell Street, London ; Miss H. P. Musgrave, Sister, Q.A.I.M.N.S.R., Queen Alexandra's Hosp., Vincent Square, London.

Miss O. Nethersole, V.A.D., Nurse, B.R.C.S., New End Mil. Hosp., Hampstead ; M. E., the Viscountess Northcliffe, G.B.E., Commdt., Northcliffe Hosp. for Officers, Grosvenor Crescent, London.

Miss M. E. O'Halloran, Sister, Q.A.I.M.N.S.R., Central Mil. Hosp., Cork ; Miss E. Oliver, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Hounslow.

Miss E. H. M. Pike, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Chiseldon Camp, Wilts.

Miss W. M. F. Rance, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Curragh ; Miss E. Rawlinson, Charge Nurse, the Lord Derby War Hosp., Warrington ; Miss M. Reed, Assist. Nurse, Reading War Hosp.

(To be continued.)

## MISS ALICE FITZGERALD, R.N.

### CHIEF NURSE OF THE LEAGUE OF RED CROSS SOCIETIES.

Miss Alice Fitzgerald, R.N., has been appointed Chief Nurse of the League of Red Cross Societies, a very high honour and well deserved.

Miss Fitzgerald was trained at the Johns Hopkins Hospital at Baltimore, U.S.A., and was graduated from that celebrated Nursing School in 1906, and her professional career is a very honourable one.

After training she was placed in charge of private wards and the dispensary at Johns Hopkins. Later she served as Operating-room Nurse at the Bellevue Hospital, New York, and was later Superintendent of Nurses, City Hospital, Wilkes Barre, and of Robert Long Hospital, University of Indiana.

In 1916 Miss Fitzgerald was sent overseas as the Edith Cavell Memorial Nurse by a group of prominent Bostonians, where she served with the British Expeditionary Force; she resigned to become affiliated with the American Red Cross, and was assigned from the Paris office to Italy in December, 1917.

She was placed in charge of the Red Cross Division of Nursing under the Service de Santé of the French Government, in which she had charge of all the American nurses working in French hospitals. The plan was to send one graduate and one French-speaking Nurse's Aid into the French hospitals to nurse American wounded. Miss Fitzgerald made over one hundred supervising trips in all parts of France. She was appointed Chief Nurse American Red Cross Commission to Europe in May, 1919, and Chief Nurse of the Red Cross Societies in October, 1919.

As the Department of Nursing of the American Red Cross—of which Miss Clara D. Noyes, R.N., is Director, and which has National Headquarters at Washington, D.C., is the model on which other nations should form themselves, it is not surprising that American nurses have been selected for both the Chair (Miss Julia C. Stimson) of the Committee on Nursing at the Cannes Conference

last year, which drew up useful recommendations—and as Head of the League of Red Cross Societies which has recently been in Session in Geneva.

Miss G. Cowlin, Graduate St. Bartholomew's Hospital, London, has been appointed assistant director of the Nursing Department of the League of Red Cross Societies.

The Americans have units of the Red Cross in Poland and the Balkans, and recently Miss Fitzgerald completed a tour of inspection through Poland, where she was everywhere convinced of the need of teaching skilled nursing methods, and of American nurses to teach Polish attendants and nurses. Very interesting letters on the subject appear in Feheman's issue of the *American Journal of Nursing*.

Miss Fitzgerald, in a communication to her *Alumnæ* magazine, states that the purpose of the League is to utilise that which already exists, and help in every way to develop Red Cross Societies, and to act as a clearing house for information of all kinds along public health lines. The League is composed of three main departments—first, the Department of Development; the Medical Department, including nursing, and the Department of Relief. The Medical Department is planning to have fourteen divisions—Child Welfare, Sanitation, Tuberculosis, Nursing, Vital Statistics, Information, Publicity, Secretarial, Demonstration, and Laboratory, Library, Museum, Industrial Hygiene, Venereal and Miscellaneous Com-



MISS ALICE FITZGERALD, R.N., CHIEF NURSE OF THE LEAGUE OF RED CROSS SOCIETIES.

municable Diseases. Each one of these has a Chief and as many assistants as necessary.

Miss Fitzgerald, has issued a simple *questionnaire*. The information received will be tabulated and issued in pamphlet form to the different Red Cross Associations. This time next year it is hoped to show good results.

There's a balm for crippled spirits

In the open view,

Running from your very footsteps,

Out into the blue,

Like a wagon track to heaven

Straight 'twixt God and you.

PERCIVAL GIBBON.



## THE NURSING PAGEANT WILL NOT TAKE PLACE.

The whole nursing world will have learned with sorrow of the sudden death from bronchial pneumonia of Sir Robert Morant, K.C.B., Chief Permanent Secretary of the Ministry of Health, who was so intimately associated with the passing into law of the Nurses' Registration Acts. Out of reverence to his memory, the Royal British Nurses' Association has decided not to hold the Nursing Pageant on April 15th, designed to celebrate the advancement of Nursing to the dignity of a Profession.

### THE FUNERAL SERVICE.

A largely attended Funeral Service for Sir Robert Morant was held on Wednesday last, at 2.30 p.m., at St. Martin-in-the Fields. Nurse-representatives of many of the Nurses' Organisations attended as a mark of respect to his memory.

## THE GENERAL NURSING COUNCIL FOR IRELAND.

The Sub-Committee appointed to frame rules are showing a most commendable spirit. They are meeting weekly. Major Harris, D.S.O., who had so much to do with pressing forward the Nurses' Registration Act (Ireland), is acting as Provisional Secretary of the G.N.C. I. He was on the Board of Education, and is now assisting in the Ministry of Health (Dublin), after an honourable record during the war. Once the rules are framed it is anticipated that the chief administrative positions will be held by professional women. This should be so under the three Acts.

## PROFESSIONAL UNION OF TRAINED NURSES.

The P.U.T.N., 17, Evelyn House, 62, Oxford Street, W. 1, are now registered under the Trades Union Act, having received the certificate of registration from the Registrar of Friendly Societies this week.

### MACCALLUM v. BURDETT.

Owing to the fact that no more cases with special juries can be taken before Easter, the action of MacCallum v. Burdett has had to be postponed till after the vacation. This, no doubt, is disappointing for Miss MacCallum, who would prefer to have the matter brought forward at an earlier date, but it will give Sir Henry Burdett the two months' rest that his doctors have ordered him in which to recover from overwork, and doubtless he is anxious to go into the witness box to prove his statements.

## APPOINTMENTS.

### MATRON.

**London Temperance Hospital, Hampstead Road, N.W. 1.**—Miss Mary Steuart Donaldson has been appointed Matron. She was trained at the Great Northern Central Hospital, Holloway Road, N., and was Staff Nurse, Ward Sister and Home Sister at the London Temperance Hospital, and Matron at the Mount Vernon Hospital, Northwood. During the war she was Matron of a Field Hospital in Serbia under the Serbian Relief Fund, Matron of a Hospital for Serbs in Haute Savoie, and has had charge of a Medical Mission in Paris for English girls with a large Out-patient Department. Miss Donaldson took up her appointment as Matron of the London Temperance Hospital ten days ago. She is well qualified by her varied experience and personality for the position in which we wish for her much happiness and success.

**The Hospital for Sick Children, Great Ormond Street, W.C.**—Miss M. C. Tisdale, R.R.C., has been appointed Matron. She was trained at King's College Hospital, and has since been Sister at Queen Mary's Hospital for Children, Carshalton; Ward Sister and Home Sister at the Queen's Hospital for Children, Hackney Road, Night Superintendent and Assistant Matron at St. Mary's Hospital, Paddington; Sister at the 1st Eastern General Hospital, Cambridge; Matron at the 2nd London General Hospital, Chelsea; and Matron at the Paddington Green Children's Hospital.

**Alexandra Hospital, Woodhall Spa, Lincs.**—Miss Mary E. Greenshields, who for the last three years has been a member of the Registered Nurses Society, 431, Oxford Street, London, W., has been appointed Matron. Since training at the Middlesex Hospital she has, for eight seasons, done X-ray and electrical work for Dr. Williams and Dr. Leonard Boys, of Woodhall Spa. To keep in touch with general hospitals work Miss Greenshields has, during the winter months, taken temporary posts in various hospitals.

**Huntley Jubilee Cottage Hospital, Aberdeen.**—Miss Jessie Spittal has been appointed Matron. She was trained at the Royal Infirmary, Edinburgh, and has been Sister and Assistant Matron at the Royal Infirmary, Dumfries, and has done five years' military service, three at home and two on the Macedonian front.

### ASSISTANT MATRON.

**General Hospital, Nottingham.**—Miss Isabella Liddle has been appointed Assistant Matron. She was trained at the Royal Victoria Infirmary, Newcastle-on-Tyne, and has been Sister of Children's Ward, Outpatient Department, Women's Ward, Night Superintendent, Housekeeping Sister, and Acting Assistant Matron at the General Hospital, Swansea.

### HOME SISTER.

**City of Westminster Union Infirmary.**—Miss Ethel Oaks has been appointed Home Sister. She was trained at the Burnley Infirmary, and has been Sister at the Southampton Fever Hospital, and at St. Mark's Hospital, City Road, Theatre Sister at the Fulham Infirmary, Night Superintendent at the Hampstead General Hospital, Sister at Queen Charlotte's Hospital, at the Bethnal Green Military Hospital, and the City of Westminster Infirmary. She is a Certified Midwife.

### SUPERINTENDENT SCHOOL NURSE.

**County Borough of Halifax.**—Mrs. Phyllis Mabel Hazlett has been appointed Superintendent School Nurse. She was trained at the Royal Infirmary, Oldham, and has been Staff Nurse at the Children's

Hospital, Birmingham, Out-patient Sister at the North Riding Infirmary, Middlesborough, Lady Welfare Superintendent under the Ministry of Munitions, and Nurse-Matron, C.S.D. National Filling Factory, Hereford.

#### HEALTH NURSE.

**Borough of Colne, Lancashire.**—Miss F. Scott has been appointed Health Nurse. She has held the position of Health Visitor under the Lancashire County Council, in the Borough of Rochdale, and is a Queen's Nurse and Certified Midwife.

#### CHILD WELFARE NURSE AND HEALTH VISITOR.

**West Riding County Council.**—Mrs. A. L. Cullis has been appointed Child Welfare Nurse and Health Visitor. She was trained at the Brompton Hospital for Consumption, at University College Hospital, and at the Hospital for Women, Soho Square, London. She has worked as a member of Q.A.I.M.N.S.R. in France, and is a certified midwife.

#### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

##### TRANSFERS AND APPOINTMENTS.

Miss Daisy E. Edgley is appointed to the Maternity Home, Three Towns, as Superintendent; Miss Mary A. Bailey is appointed to Jewish Maternity and Sick Room Helps Nursing Society. Miss Winifred M. Brennan to Widnes; Miss Rose Freeman to Dartmouth; Miss Evelyn M. Gaunt to Reigate; Miss Hannah H. Graveson to Three Towns; Miss Annie Griffiths to West Riding Training Home; Miss Violet E. Howells to Prestwich; Miss Lilian R. Kimmons, to Reigate; Miss Teresa O. Leonard to Swanley; Miss Sarah A. G. Lett to Southfleet; Miss Rosa L. Matthews to Heywood; Miss Elizabeth M. Owen to Heywood; Miss Harriet A. Powell to Neston.

#### MEDALS FOR NURSES.

On March 10th, prior to the commencement of the ordinary business of the Board of Management of the King Edward VII Hospital, Cardiff, the "Sir William James Thomas Endowment Medals" to the three most proficient nurses of the year were presented by Lady Thomas.

Dr. D. R. Paterson, who temporarily occupied the chair, said that training for the nursing profession was becoming intensified year by year, and great were the demands in the way of education. The nursing course had been increased from three to four years, and the standards were becoming higher than ever.

The gold medal was awarded to Nurse Louisa Protheroe, the silver medal to Nurse Gladys Muriel Davies, and the bronze medal to Nurse Margaret Dorothy Jones.

#### EXPERT TAILORING.

Now that the Spring days are finding out the deficiencies in our wardrobes, the question of their replenishment is one of the immediate future, and, as in these days a new coat and skirt is a serious matter, it is of importance to decide who shall make it. At the establishment of Mr. Herbert Meller, of 5, Baker Street, Portman Square, W. (from Premet, Paris) customers find every consideration and courtesy, as well as the most expert tailoring, and Mr. Meller will be pleased to give information and show materials and models, to those calling at 5, Baker Street (first floor). Special consideration is given to nurses.

## RESIGNATIONS.

### LONDON TEMPERANCE HOSPITAL.

The many friends interested in the training school for nurses at the London Temperance Hospital will learn with deep regret that their beloved Matron, Miss A. J. Richardson, has retired after twenty-eight years' work there.

Those of us who have lived and worked with her feel it laid upon us to pay homage to the loss that we, in common with the whole nursing profession, are suffering on her withdrawal from the activities of her Matronship. Her personality and influence for good have left their mark for ever on our lives.

No one who took part in the wonderful Re-union of Past and Present Nurses, held in the Out-patient Hall on the 21st Anniversary of Miss Richardson's commencement of duty, will ever forget the manifestation of love and reverence shown to her, and the appreciation of the home-like atmosphere characteristic of the L.T.H. under her rule. It was not possible on her retirement to arrange any official gathering, but keen as is the sense of loss, our love and hope for her peaceful and happy future mingle with this saddest of partings.

F. B.

The many London Temperance Hospital Nurses scattered over the world will hear with regret that their training school is losing Sister Dora Hinton, who is giving up her much-loved work there.

There is not a nurse who has been trained at the hospital during the last twenty-five years who will not agree that any success she may have attained in the nursing profession is largely due to the training she received under Sister Dora.

Not only in the technical part of the work but by the untiring devotion and care shown to every patient in her wards, her example has been an inspiration and lesson to every one of her nurses.

To some of us who have worked side by side with Sister Dora for many years, she has been one of our truest friends. Our hearts are very sad at this parting of the ways, and we feel there is a blank that can never be filled by anyone else.

We can only thank God for all Sister Dora has been to the hospital, and ask for His richest blessing on the quieter days in front of her.

H. C.

### CHELSEA INFIRMARY.

The resignation by Miss Eleanor C. Barton, R.R.C., of the position of Matron of the Chelsea Infirmary will be regretted by both past and present members of the nursing staff, with whom she is very popular.

In tendering her resignation to the Board of Guardians at their last meeting, Miss Barton expressed her deep regret at leaving, saying that no one could have received more kindness and courtesy than she had done from every member of the Board. It was accepted with great regret, and Mr. Chambers, who moved the resolution to that effect, pointed out that Miss Barton had saved the ratepayers of Chelsea thousands of pounds in advertisements alone. He did not remember a single advertisement being issued for either probationers or nurses in the Infirmary. This was endorsed by the chairman, who also paid a tribute to Miss Barton's good management.

We agree that for the vacancies on the staff of any poor law infirmary to be filled, in these days, without advertising, proves that the Matron and higher nursing officials have gained for it a high reputation in the nursing world, so that positions under their direction are held to be desirable.

Miss Barton was trained at St. Bartholomew's Hospital, and was Principal Matron of No. 3 London General Hospital, Wandsworth, during the war, and received the R.R.C. First Class for her services.

She hopes to live in London, and to widen the scope of her active interests when her arduous work as a Matron comes to an end in June.

With State organisation of the Nursing Profession before us—the principle of which has always received enthusiastic support from Miss Barton—she will doubtless find plenty to do.

## THE HOSPITAL WORLD.

There is no doubt that Voluntary Hospital Secretaries are having a very anxious time—owing to the growing deficit in these institutions. Mr. Philip A. Inman proposes united effort, organized in the united name of the three London hospital funds, the Saturday Fund (of which he is secretary), the King's Fund, and the Sunday Fund. He advocates a hospital week—collections to be taken in places of worship, in offices, workshops, factories, sports grounds, and other centres.

The suggestion that patients should pay 10s. a week will not meet the need, and has many disadvantages. The Saturday Fund has risen from £40,600 in 1914 to £74,600 in 1919, which proves there is no increasing apathy towards the support of hospitals.

Legacies amounting to about £130,000 were left to Leeds Hospitals and to the Church by Mr. William Bartholomew, Ridgeway House, Headingley, Leeds, a civil engineer.

The Leeds Women's and Children's Hospital, and the Leeds General Infirmary benefit by these bequests, and are greatly in need of such aid, as schemes for improvement are under consideration, especially in connection with the nursing departments.

We are informed in reference to a paragraph which appeared in our issue of March 6th, that children with tuberculous disease of the bones and joints are now eligible for admission to the Alexandra Hospital for Children with Hip Disease, this course having been adopted some two and a half years ago.

An appeal is being made for £50,000 for the reconstruction of the Mildmay Memorial Hospital in North London, in order that it may be adapted for the "new poor." It is proposed to charge two and a half guineas per week, and to accommodate 110 patients, giving each separate accommodation.

The hospital, planned as a cottage hospital, was erected in 1884, and endowments were subscribed as a memorial to the late Rev. William Pennefather.

## BOOK OF THE WEEK.

### "THE TAMING OF NAN."\*

It was reiterated by many reviewers of a former book, "Helen of the Four Gates," by this author that its dominant characteristic was power. In this latest work of Miss Ethel Holdsworth the same dominating power is evident, and holds the reader under its sway. But in addition to its power must be added originality and graceful imaginative description.

Nan, the untamable hooligan, the Stone Age hidden under the veneer of civilisation, who had neither humour, imagination, nor protectiveness, who should have been an Apache's mate, had married instead a porter who gave her a pound a week and bought his own clothes. With that look upon her, it seemed miraculous that the cramped drab kitchen could hold her.

Outwardly she was a comely woman with a pleasant exterior.

The "Big Porter," as he was known to Lancashire and Cheshire passengers, was almost a giant of a man, fair haired, with a mouth that did not need covering up, and blue eyes of a sleepy order, which had been defined by his mother as being able "to see without looking."

"The glance he shot at the woman in the chair was one of affectionate tolerance, mingled with that of a man who has lost all his illusions, but knows that he has his feet if the worst comes to the worst."

Their daughter, Polly, is a charming creation, and though by no means ordinary, her naturalness is very convincing. A mill-hand, a charming, wilful, babyish, provocative creature, the star of the village choir, with the voice of a thrush. A termagant mother, a delightful father, and a sordid home form the centre from which all the other characters evolve, and around which they circle. For the book is full of character studies, each of which arrests the attention. To understand and digest Nan, it is essential that the book should be read; no few words could convey an adequate idea of this astounding woman. Cherry was too big hearted and generous, and withal too affectionate to give the shrew the only treatment which, apparently, she would have appreciated. His home and charming Polly's was made a veritable hell by Nan's insane tongue. We have Nan in the first chapter, after one of her all too common outbursts of fury, sweeping her husband out with salt, sweeping him, according to the black wish, out of her life, while the Lord's Prayer, chanted backwards, made the spell efficient. The moment of her turning to go within synchronised with that whereon Cherry remarked to his pal, "Thank God for feet, Billy!"

That same day splendid, powerful Cherry had both his feet cut off on the line. Not that that incident tamed Nan—not at all. It was only the beginning of things, and the giant had yet to suffer much humiliation at her hands.

\*By Ethel Holdsworth. (London: Herbert Jenkins.)

What a lifelike and convincing sketch is that of Polly coming through the wheatfields in the evening with her boisterous and undesirable companions!

She was singing "He shall feed His Flock," her head flung back. There was no thought of faith or religious fervour in the way she sang. Had she sung a ragtime she would have sung it with the same fine quality of ecstasy. The wheatfield had suggested it to her irresponsible mind. Through the surging sea of its glory she sang—as though she were the only person the globe had been made for. Then came Adam Wild, the young farmer, with his indignation at the trespass and his cowardly kissing of the girl, "sacrilege for sacrilege."

"Now get out o' my field," he said, thunderingly, and placing both hands on her sob-shaken shoulders, thrust her out.

"If there was only a man an' a monkey on th' earth," she told him, "an' you were the man, I'd take the monkey."

"Get out o' my field," said the contemptuous masculine bass.

"Wait till my granny comes to tell your dad," she said, with a childishness that made him smile.

Her voice was retreating.

Perhaps that gave it its forlorn sound.

It was on her return from this encounter that she heard of her father's accident.

Cherry's fight against his untoward fate is a great piece of character delineation.

"He hated the people who were sorry for him. Some men would have enjoyed it. He hadn't been built for a cripple. Now, if he had been made like the chap in the next bed to him, when in hospital—the chap who didn't want to go home because he was tucked up six times a day by a pretty nurse and fed and washed like a big baby—how much easier it would have been."

But Cherry triumphed, and they moved from the squalor into a pretty cottage and set up a pedlar business and succeeded, and Nan found religion in the Salvation Army and began to show a softer side with the advent of little Rob, the nurse child.

Rob's mother looked at the woman who she had been told wanted a child to nurse.

"You'll not hit him, will you, missus?" she asked, pleadingly; "I've never hit him in my life."

Nan answered with her usual blasphemy. "What do you take me for?" But she had winced.

At this period also Nan accepted a partnership in the business.

"She would work at the sewing machine with furious vigour, hours at a stretch without food, where another woman would have fainted. She might have discovered a North Pole by her single virtue of savage persistency. But she was built all wrong for a little house, the mothering of a foolish girl and—the coddling of a broken man."

The removal of Rob threw her out of gear again

and there were more upheavals; and then there was a quite untrue scandal circulated about childish Polly, and she being young and sensitive ran away.

Nan was "dressed up."

"The lass has gone an' done summat," she said to granny; "an' now I'm goin' to that Martha Jay—to give her a hidin' first of all—an' then—I'm goin' to seek our Polly."

Granny stared. "Vengeance is Mine," Nan, she quoted.

"I were told to go an' see her an' hide her," said Nan, calmly; "an' I'm goin'."

She went.

It was Adam who found and eventually married charming Polly, with her babyish habit of saying "Oooh!" at anything that pleased or surprised her.

"If ever he doesn't do right by thee, I'll kill him as dead as a herring," said Nan, her high colouring ebbing, her eyes ablaze.

And Polly giggled and dabbed her eyes, and said, "Well, I'll have to go now, I suppose."

A book that will linger in the memory long after it has been laid aside.

H. H.

## OUTSIDE THE GATES.

Viscountess Rhondda has been appointed Chairman of the General Health Consultative Council in connection with the Ministry of Health, and is therefore resigning the position of Chair of the Women's Health Watching Council. It is probable that the latter organisation will now be dissolved, as it costs much more to maintain than the Federated Women's Organisations pay.

The Nurses, Midwives and Sanitary Inspectors who are classed as allied services with medicine, fell between two stools, not having been given representation on the Medical Advisory Council, as expected. They were not nominated for representation on the General Health Consultative Council, so that Nurses and Midwives are the only classes excluded from representation in this National Health Advisory Scheme. Let us hope this serious omission may be remedied at an early date.

If, however, the General Nursing Council is truly representative of nursing opinion, it will be able to express expert opinion so far as Nursing is concerned with National Health, should the Minister of Health need advice.

Mrs. C. Ashby, vice chairman of the Wandsworth Board of Guardians, has been adopted as prospective Liberal candidate for the Richmond Parliamentary borough.

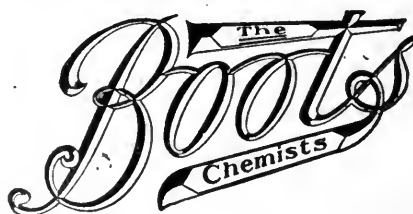
## COMING EVENT.

March 19th.—Professional Union of Trained Nurses. Mass Meeting. Scottish Nurses' Club, 205, Bath Street, Glasgow. 7.30 p.m.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## A MANURE CART FOR MIDWIVES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM.—Your correspondent, Mrs. M. Mortishead, illustrates her statement as to the lack of courtesy extended to a Poor-Law midwife, by a member of the public authority employing her, by the case of a Poor-Law Guardian in the Co. Meath who sent a farm manure cart to take her to attend the wife of one of his labourers. While it is quite true that the Guardian's opinion of the status of the midwife is sufficiently evident, the lesson is a far deeper one than lack of courtesy, and proves that the Guardian in question entirely failed to safeguard the interests of this expectant mother, and his dangerous ignorance of what constitutes an efficient attendant in maternity cases.

It is not without good reason that the rules issued to midwives by the respective Central Midwives Boards for the three kingdoms enjoin upon them scrupulous cleanliness the wearing of clean dresses of washable material that can be boiled, the disinfection, preferably by boiling, of all instruments and other appliances, for any deviation from the observance of the principle of strict surgical cleanliness may mean that, instead of life, the midwife may bring death into the house.

We know how susceptible a parturient woman is to infection through germs in not only visible, but invisible, dirt. We know how readily infection is conveyed to an infant through the stump of the newly cut cord. The historic instance of the holocaust of infants in the island of St. Kilda is a case in point. Baby after baby died of tetanus, and it was only when it was realised that this was due to infection of the cord, by attendants who did not understand the principles of asepsis, that the plague was stayed.

The germ of tetanus flourishes in manure and if the County Meath midwife had used the conveyance provided for her there might have been two deaths—one from puerperal fever, the other from tetanus; and they would have been primarily due to the ignorance of a member of a public authority who ought to have known better.

Yours faithfully,

CERTIFIED MIDWIFE.

## NURSES ON STRIKE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The letters from Mrs. M. Mortishead and Miss McGrath both raise questions of great interest and importance. It is the discussion of such matters which is needed to give nurses confidence to organise.

My own view is as follows:—

Strikes have served a real purpose, without

them the nation would have been ill-fed and have deteriorated and become weak and poor.

This does not mean that a strike should take place without regard to the amount of harm and bad feeling it produces. To be successful a trade union must retain a sense of proportion and have good feeling towards the community.

A cruel strike will not improve the understanding of stupid persons on governing bodies, nor destroy their callousness, it will only draw sympathy away from the real grievances of nurses.

For those who fear strikes, may I add that organisation leads to consideration before action and to knowledge of affairs. I have witnessed a strike in a munition factory in which the women were not trade unionists. This strike was sudden, it was quite unjustified, it was at the most critical moment of the war.

I have also witnessed a girl, white with rage, because of real injustice, calmed down by a trade union organiser. The injustice was later on righted by peaceful trade union action.

The organisation of the nursing profession seems to me the only road to justice and peace, as well as to the development of the science and art of nursing.

The profession requires a self-governing society, with rules which bring it within the "Trade Union Act," so that it can interfere between employer and employed without fear of being accused of conspiracy. The name of the association does not matter.

The constitutions of both the Royal British Nurses' Association and the College of Nursing prevent these societies from coming within this Act.

The nursing profession can only secure the fruit of victory by organising. Even the General Council of Nursing can do little for nurses, unless the Council has an organised profession behind it.

Nurses must use the General Council of Nursing, but they will degenerate as soon as they lean upon it.

If nurses are dependent they will be treated as dependent, if they have initiative it will be used.

If women are human beings they will be treated as human beings, if they like to be machines they will be treated as machines.

A nurses' trade union should be a strong moral force in the country, for there is no doubt that nursing brings out the very finest human qualities.

Yours faithfully,

HELEN G. KLAASSEN.

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*March 20th.*—How would you prevent foot-drop, acute thirst, constipation and vomiting after an operation?

*March 27th.*—(a) Describe fully the varieties of Uterine Inertia; (b) What treatment would you adopt in each case?



# The Midwife.

## CENTRAL MIDWIVES BOARD.

### LIST OF SUCCESSFUL CANDIDATES.

(Concluded from page 166.)

#### PROVINCIAL.

*Aston Union Workhouse.*—H. J. Howells, F. M. Kirby, N. Powis.

*Birkenhead Maternity Hospital.*—E. Cook, E. M. Cottle, N. Pimbley.

*Birmingham Maternity Hospital.*—R. Barton, A. M. Bishton, F. E. Burnett, C. Campion, N. A. Child, E. M. Cooper, J. Entwistle, D. M. Fox, G. E. Hall, K. N. Henstock, A. Hollingworth, E. A. Lawley, H. Onions, D. M. Spring, E. Waters, L. Wiseman.

*Bradford Municipal Maternity Hospital.*—E. Atkinson, L. Barlow, M. Law, E. R. Mahy, B. Wilson, E. Wormald.

*Brighton Hospital for Women.*—G. M. Ash, E. C. Crummack, A. S. Godrich, I. Goodman, B. A. Gorringe, B. A. C. Harris, A. E. E. Hill, M. H. King, I. C. Mann, M. B. Miller, M. L. Stacey, C. E. L. Wells, G. E. Wright.

*Bristol, Eastville Workhouse Infirmary.*—V. E. Bailey.

*Bristol, General Hospital.*—E. M. Bingle, A. Lane, C. Moffatt, F. L. Reynolds.

*Bristol, Royal Infirmary.*—F. E. L. M. Harper, J. T. McDonald, E. C. Puddicombe, M. D. Stephens, E. E. Wason.

*Carlisle District Nursing Association.*—E. Miller, L. F. Parsonage.

*Cheltenham District Nursing Association.*—L. A. Gregg, A. M. Hopkinson, S. A. Lewis, C. B. Sinnott, E. A. Thornley, E. C. Wilson.

*Darwen District Nursing Association.*—A. Aspden, M. Chalkley.

*Derby, Derbyshire Nursing Association.*—A. A. Davey, J. A. Donkin, R. S. Isherwood, E. E. Marchant, I. Montford, M. E. Nicholson, E. L. M. Pearson, K. Pole, A. Powell, B. Pratt, I. I. Robson, C. Waldron.

*Devon and Cornwall Training School.*—J. L. Dan, J. Downing, C. H. Fraser, L. Herniman, L. Jackson, S. A. Jeffery, A. Kirk, J. H. Kirkpatrick, K. Lawer, A. McInnis.

*Devonport, Alexandra Nursing Home.*—M. E. Black, N. Bloor, L. M. Day, C. M. Eveleigh, L. Whitlow.

*Devonport, Military Families' Hospital.*—I. Cunningham.

*Gloucester District Nursing Society.*—H. M. Boston, O. M. Gordon, H. L. M. Hall.

*Halifax District Nursing Association.*—A. Sutcliffe.

*Hastings District Nursing Association.*—J. Skilton, E. R. Willis.

*Herts County Nursing Association.*—S. E. Brison, B. L. Goose.

*Huddersfield District Nursing Association and Huddersfield Union Workhouse.*—H. B. Auckland, H. Wood.

*Hull Lying-in-Charity.*—E. R. Anson, M. Roden.  
*Hull Municipal Maternity Home.*—E. M. Brown, F. G. Bulmer, I. O. Thomson.

*Ipswich Nurses' Home.*—A. A. Dixie, B. F. Phelan, H. D. White.

*Kingswood Nursing Association.*—R. Whittard.  
*Leeds Maternity Hospital.*—E. Atkinson, C. M.

Bailey, A. L. Barker, L. Barnes, L. C. Baron, H. Bentley, E. Broadbent, E. E. Broadbent, L. A. Church, M. Colleran, S. Cook, E. A. Davieson, E. Dransfield, M. Ducker, B. Eager, M. E. Gloyne, M. Hewett-Emmett, V. Hunt, A. E. Jones, C. Lascelles, A. A. Massheder, R. Nolan, H. B. Perkins, G. E. Prior, E. Rodgers, S. J. Rostron, E. Routledge, R. E. Skidmore, A. Sunderland, J. Taylor, A. Tipton, H. M. Wass, M. Winters, G. R. Wright.

*Leeds Union Infirmary.*—E. Breach, A. Kirkbride, M. Pollock.

*Leeds: St. Faith's Maternity Home.*—A. E. Maw.

*Leicester Maternity Hospital.*—M. A. Dilworth, D. M. Hill, L. M. Sweet.

*Leicester Union Infirmary.*—M. Ryan, C. M. Tedstone.

*Lewes District Nursing Association.*—D. I. Dickson.

*Liverpool Maternity Hospital.*—I. G. Andrews, E. J. M. Bell, E. A. Cooke, E. E. Dean, D. Forster, F. Kitson, S. J. Pinnington, C. E. K. Rixon, F. E. Roberts, E. E. Robinson, M. A. Robinson, M. Unsworth, C. I. A. Van Crans, M. A. Wharton.

*Liverpool Workhouse Hospital.*—C. Jones, E. M. Scroggie.

*Manchester: St. Mary's Hospitals.*—D. K. Beeson, E. Chettle, M. M. Fernihough, C. Hartley, A. Jenkins, M. Martin, R. O'Brien, I. Robinson, E. N. H. Rogers, N. Smethurst.

*Manchester Workhouse Infirmary.*—E. M. Bibby, D. M. Buss, C. Clark, G. M. Kirk, F. G. Partington.

*Manchester Workhouse Infirmary, and St. Mary's Hospitals, Manchester.*—M. E. Heath, L. F. Price.

*Newcastle-on-Tyne Maternity Hospital.*—M. Archibald, E. Bailey, G. Daybell, M. B. Richardson, C. Trobe, E. Turnbull.

*Northampton Q.V.N.I.*—L. A. Allman, F. E. Craston, E. Hudson, L. G. Mercer.

*North Bierley Union Infirmary.*—F. E. Pearson.

*Nottingham Workhouse Infirmary.*—M. H. Hampshire, F. M. Holland, M. A. Mayne, M. E. Potter, O. Thomas.

*Portsmouth Military Families Hospital.*—M. N. Allsop, F. E. M. Candy.

*Preston Union Workhouse.*—M. Singleton.

*Rochdale Municipal Maternity Hospital.*—F. Bambridge.

*Royal Hants County Hospital.*—H. Hayward, C. D. Thomas.

*Selly Oak Union Infirmary.*—A. M. Davies, G. Phillips.

*St. Faith's Maternity Home and West Riding Nursing Association.*—E. Anderson, A. M. West.

*Sheffield Union Hospital.*—N. Adams, E. E. Brown, S. H. Ollier, K. E. B. Thompson.

*Sheffield: Jessop Hospital.*—M. J. Barlow, M. J. Beech, M. Corlett, E. G. Cresswell, A. Croxton, A. W. Johnson.

*Staffs Training Home for Nurses.*—A. Bentley, H. Enoch, W. I. Fox, A. L. McDowall, H. Moreton.

*Wakefield Municipal Maternity Hospital.*—F. P. Harrop.

*Wakefield Union Infirmary.*—G. Upton, C. Williams.

*Walton, West Derby Union Infirmary.*—E. A. Riding, M. E. Tanner.

*West Riding Nursing Association.*—M. W. Anderson, E. Bithell, F. A. Caslake, M. J. Dunstan, E. Mitchell, E. M. Prentis, M. Tattersall.

*Wilts Nursing Association.*—W. B. Lambert, A. E. Jenkins.

*Weymouth, Princess Christian Hospital.*—M. Jasper.

*Worcester County Nursing Association.*—F. A. Edwards, E. M. Inns, C. A. McGregor, G. M. Roberts, E. Stevens.

*York Maternity Hospital.*—M. Barron, E. Godfrey, E. McHugh.

#### WALES.

*Cardiff: King Edward VII Maternity Hospital.*—E. A. Cooper, E. A. Pickard.

*Cardiff: Q.V.J.N.I.*—E. A. Davies, E. Jones, G. M. Lawry, S. J. Parker, E. A. Pope, M. L. Simmons.

*Monmouthshire Training Centre.*—C. Birch, M. Coughlan, F. E. Gammon, E. Morgan, R. Smithey, E. A. Sullivan.

*Monmouthshire Nursing Association.*—C. M. Brace, H. M. Jenkins.

*Monmouthshire Training Centre and Monmouthshire Nursing Association.*—C. M. Phillips.

#### SCOTLAND.

*Dundee Maternity Hospital.*—J. Hockley.

#### APPLICATIONS.

At the last meeting of the Central Midwives Board the following applications were received:—

*For Approval as Lecturer.*—Dr. Jessie, J. M. Morton, M.B., D.P.H., Dr. John J. Hughes, and Dr. J. M. Valentine, D.P.H.

*Of Certified Midwives for Approval as Teachers.*—Midwife Catherine O'Neil (No. 43,552), Midwife Elizabeth Prince (No. 13334).

The applications were granted.

#### ROYAL MATERNITY CHARITY OF LONDON.

The annual general meeting of the Governors of the above Charity took place at the Charity's

Offices, 38, John Street, Bedford Row, W.C. 1, recently, when the annual report from the General Committee and the financial statement of the auditors were received and adopted, and the General Committee and auditors elected for the current year.

#### LEICESTER AND LEICESTERSHIRE MIDWIVES ASSOCIATION.

The seventh annual meeting of the Leicester and Leicestershire Midwives Association was held at the County Assembly Rooms, Leicester, on March 10th, when Colonel Bond, C.M.G., presided.

In his opening remarks Colonel Bond emphasised the importance of the care of young infants by midwives. They should at least take steps to watch over them during their first year of life. It was a terrible thing to contemplate that 100,000 lives were sacrificed every year before birth and nearly 100,000 babies died annually before attaining the age of one year.

The adoption of the Annual Report was moved by Mrs. Bond, seconded by Mrs. Lankester, and carried. It showed that the Association had interested itself in a variety of social and professional questions during the year, and had also been the recipient of pleasant hospitality. It urged delegates to other Societies to acquaint themselves with their aims and objects, and the rank and file of members to keep their delegates informed as to their wishes.

Mrs. Bond, in moving the adoption of the Report remarked that midwives had never had the appreciation they should have had in the scheme of child welfare throughout the country, nor had they received sufficient remuneration to permit them to give up work when overworked—remarks which were received with applause.

#### RESOLUTION.

A resolution was passed approving of immediate treatment, and, where practicable, of self-disinfection after exposure to the risk of venereal infection, but disapproving of the distribution to the public of "Prophylactic Packets." It stated that the Association "feels very strongly that any instruction, written, printed, or otherwise given on the subject should include a carefully-worded statement pointing out the immorality of promiscuous sexual intercourse, as well as the danger thereby incurred of venereal disease."

The Chairman referred to the lowering of moral standards in regard to sex matters and the consequent increase in venereal diseases amongst the civil population, and the opportunities of midwives to combating venereal disease.

The thanks of the Association were recorded to its President, Miss Pell Smith, for her services as chairman.

# THE BRITISH JOURNAL OF NURSING

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Vol. LXIV

## EDITORIAL.

### A COLLEGIATE LIFE FOR NURSES.

The old order is changing, and in no section of the community more than in the nursing world in reference to the conditions of work and life of nurses. Rightly so, for, both as to hours on duty and payment for skilled services, unjustifiably long hours have been exacted from them, and their strenuous and responsible work has been rewarded with most meagre pay. But, now that hours on duty are being lessened, hospital governors and Boards of Guardians are confronted with a very acute problem in connection with accommodation for their nursing staffs, for hours on duty cannot be shortened without materially increasing the staff, and, in addition to a considerable increase in expense as to salaries, the enlargement of Nursing Homes is urgently needed at a time when building is more costly and labour scarcer than ever before.

In addition they are faced by the consideration that the modern girl when off duty in many instances wishes to be her own mistress, and life in a Nurses' Home, where she is under strict rule, does not attract her. She prefers an occupation in which she can "live out."

The pros and cons of the position require very careful consideration, and we propose to examine them both from the point of view of the nurses, and also that of the patients, who must be every true nurse's first consideration.

The proposal that nurses should live out is urged by the Lambeth Board of Guardians, through its Chairman, Mr. Frank Briant, M.P., and the Ministry of Health has been invited to consider it, both on the ground of saving to the ratepayers in the matter of building, furnishing, and equipping new quarters for additional nurses, and also because it is believed that it would tend to attract the best type of women to the work. It is assumed that if an eight

hours' day is in force there is no reason why nurses, like clerical workers, should not live at home and attend the hospitals daily. But the care of the sick, which goes on continuously the 24 hours round, for seven days a week, is not comparable with the work of clerks for one shift of eight hours on  $5\frac{1}{2}$  days a week.

Supposing that the nursing staff lived out, the first day shift, which would have to be in the wards early in the morning, could not be relied upon. In such a climate as ours the discomfort on cold and wet mornings would certainly be prejudicial to the health of the nurses. A certain proportion would not arrive on duty at all, and others would begin the day below par. The patients as well as the nurses would suffer from the disorganization thus arising.

Another point, which cannot be overlooked, is the circumscribed area from which the nursing staff of a hospital would be drawn. At present such staffs are recruited from all over the kingdom. To meet this difficulty it is probable that hostels would grow up in the neighbourhood of hospitals, but such hostels would have to be most carefully supervised.

In our opinion, the best results would be obtained by retaining the provision for housing the nursing staffs of hospitals in Homes provided for this purpose, but by reorganizing such Homes on a collegiate basis, so that when off duty the nurses would have the freedom of action which undergraduates are permitted during their residence, in college, at a University. The charm of life under such communal conditions is both healthy and invigorating, and is often looked forward to, and back upon, by young men and women as the happiest time in their lives. There is no reason why the same good fellowship and comradeship, potent influences in the development of character, should not form an integral part of the three years' training course for nurses.

## OUR PRIZE COMPETITION.

### HOW WOULD YOU PREVENT FOOT DROP, ACUTE THIRST, CONSTIPATION, AND VOMITING AFTER AN OPERATION?

We have pleasure in awarding the prize this week to Miss Alice M. Burns, East Suffolk Hospital, Ipswich.

#### PRIZE PAPER.

##### FOOT DROP (TO PREVENT).

In many operations on the feet and legs this trouble is obviated at the time of operation by putting the limb on a splint with a footpiece, or else in plaster, but if this has not been done a cradle should be placed over the limb to prevent the weight of the bedclothes falling on the foot, and the sole of the foot should be supported against something firm—a sandbag or well-protected hot-water bottle.

##### ACUTE THIRST.

When a major operation has been performed, and fluids by mouth must needs be restricted, acute thirst may be relieved by copious mouth washes, which need not of necessity be medicated. Lemon water and weak tea are much appreciated, and patients can usually be trusted not to swallow them if the reason for so doing is explained to them. But if fluids are to be restricted for a week or two, and the amount of shock is great, saline infusions will have to be resorted to; these will, of course, be given only by the surgeon's order. It is usual to give a pint of saline every four hours per rectum. Sips of hot water will often relieve acute thirst if permitted by the surgeon.

##### CONSTIPATION.

In cases of operation on the limbs, a purge may be ordered the following day. After an abdominal operation a dose of *ol ricini* on the third evening is often ordered as a routine treatment, and if one drachm of glycerine is given with the dose the constipating after effects of castor oil will be avoided. To correct any tendency to constipation in a patient liquid paraffin may be ordered regularly three times a day—dose  $\frac{3}{4}$  i for the adult. If it be given with cold water it is not unpleasant to take.

##### TO PREVENT VOMITING.

Some patients vomit after an operation, no matter how carefully they are prepared; yet the following means are successful in most cases:—Give a good purge the night before the operation, or two nights before if the case is a rectal one. On the morning of the opera-

tion give a copious enema early. Give the last meal six hours before the operation. It should consist of something easily digested—bread and butter and tea for preference. Allow a cup of beef tea four hours before the operation, and nothing after. At this stage, too, it is wise to keep the patient as cheerful as possible, as vomiting may be a reflex action of fear; the more a patient worries about his forthcoming operation, too, the greater will be the degree of shock afterwards. When the patient regains consciousness he will at once complain of thirst, and if this is satisfied judiciously, vomiting will result. It is usual to deny fluids by mouth for three or four hours, but if thirst is great a mouth wash of cold water may be given, or sips of very hot water so small that they are absorbed before reaching the stomach. Some surgeons order a hypodermic injection of morphia to be given on the patient's return to the ward, and this is usually efficacious in checking vomiting. The idea of all treatment is to put and keep the alimentary tract at rest until the irritation of the mucous membranes caused by the anæsthetic has passed off.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Sarah Ann Cross, Miss Freda Margaret Wilson, Miss Jane Evans, Miss M. Bryan.

Miss Freda M. Wilson writes:—Acute thirst is generally a patient's chief complaint after operation. Any water given to relieve it will sooner or later be vomited, and it is a safe rule not to give anything by mouth for at least six to eight hours. This treatment, though very trying for the patient, gives him the least discomfort in the end, as the constant sipping of water not only increases his thirst, but also induces vomiting.

The dryness of the mouth may be alleviated by swabbing it out with a mixture of lemon and glycerine, and it may be frequently rinsed out with hot water or lemon and soda, provided that the patient does not swallow any of it.

The only satisfactory way, however, of relieving acute thirst is by the introduction of fluid into the body which can be absorbed into the circulation. The best means is by giving rectal salines. In some cases of abdominal operations saline is poured into the peritoneal cavity before the wound is stitched up.

#### QUESTION FOR NEXT WEEK.

(a) Describe fully the varieties of uterine inertia; (b) what treatment would you adopt in each case?

## NURSING ECHOES.

The visit paid by the Queen last week to the Imperial Nurses' Club, 137, Ebury Street, S.W. 1, was a complete surprise, the first intimation the Hon. Secretary and Lady Superintendent, Miss C. H. Mayers, had of it being Her Majesty's arrival at the Club. The Queen went into the dining-room, where members of the Club and their guests were having tea, and seemed interested in the old Irish colour prints on the walls. It so happened that the flowers on the little separate tables were rather choice, for a kind friend of the Club in the country who frequently provides it with flowers had sent a supply of orchids. The lounge looked decidedly as if it were popular, having that untidy, disarranged sort of air that a newspaper room is apt to wear. From the writing-room window the Queen particularly noticed the little garden, which adds so much to the pleasure of the members, and it seemed to please her. While in the drawing-room she asked about the number of Nursing Sisters who had used the Club during the war, a question Miss Mayers could not answer off-hand. She tells us that it is difficult to say how many individuals have used the beds, but she knows the number of beds used. They were 1,633 in 1917, 3,868 in 1918, 8,456 in 1919; total, 13,957. There is thus no doubt as to the increasing popularity of the Club.

Her Majesty Queen Mary visited Queen Mary's new and permanent Hostel for Nurses at 194, Queen's Gate on Saturday afternoon, March 13th. She was received by Sir Harold Boulton, Chairman, and the Committee, the Hon. Staff, and Mrs. Dundas, Superintendent, and the other ladies of the resident Staff.

Her Majesty placed in position a small brass tablet, on which it is stated that "this house was equipped by £2,000 given by the Australian Government, in recognition of the hospitality shown to Australian Nurses during the Great War." After this ceremony Her Majesty inspected the whole house, and the nurses who were waiting in the drawing-room were all presented to her.

Her Majesty then signed the visitors' book, and on passing out to her carriage stopped to speak to the maids who were lined up in the hall, congratulating them on their long service in the Hostels.

Her Majesty was graciously pleased to express her approval of all she saw, and her kindly interest in the working of the Hostel is much appreciated by all concerned.

The Queen, attended by the Lady Mary Trefusis, visited the City of Westminster Union Infirmary, Fulham Road, on March 17th. Her Majesty's visit gave great pleasure to the nursing staff, engaged in a branch of nursing work of which the value is not yet fully recognized, but which is a most important branch of public service, and to the patients, who have little variation in their lives, and to whom the Queen's interest in their welfare is a joy.

The late millionaire, Lord Astor, left property valued for the purposes of the English grant at £421,963 4s. 10d., which is disposed of by the English will. Amongst his bequests was one of £2,000 to his nurse, Miss Mary Jeffreys, who attended him for many years, and whom, we believe, he treated generously during his lifetime.

An extraordinary state of affairs is alleged in the report made to the Hastings Board of Guardians by the new Medical Superintendent and Master Doctor, Mr. E. L. White. In the report complaints are made regarding the lack of staff and accommodation, and the milk supply is condemned.

It is stated that there is a lack of bathing facilities, and dissatisfaction exists among the staff about food. The report states that when a lad was brought into the infirmary with an injury to his throat there was no needle to sew the wound up with, and no saline to give him.

The sick wards are condemned, and the doctor appeals for more nurses, adding that some are leaving, another is on the verge of a nervous breakdown, and one is suffering from delusional insanity.

The Guardians are divided over the report, one half supporting the doctor, the other half being against the report. Local Labour is condemning the Guardians, and for the Guardian elections has two candidates in the field.

The Canadian National Association of Trained Nurses, which raised funds to send thirteen nurses to France, as members of the French Flag Nursing Corps, had a bank balance of 169 dollars. It was decided to send this surplus to Miss Annie I. Browne, a graduate of Toronto General Hospital, who had gone to France to help in reconstruction work. Miss Browne was appointed Supervisor of the orphans at the Orphelins de la Guerre, Vielle Chapelle, Marseilles, and the committee felt the money would be well expended by purchasing necessities and a few luxuries for the little orphans.

## HONOURS FOR NURSES.

## ROYAL RED CROSS.

At an Investiture at Buckingham Palace on March 17th, the King conferred the following decorations:—

## THE ROYAL RED CROSS (FIRST CLASS.)

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Margaret Jessop and Miss Kathleen Latham.

*Territorial Force Nursing Service.*—Miss Cecilia Richard and Miss Ellen May.

## THE ROYAL RED CROSS (SECOND CLASS.)

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Charlotte Bottomley, Miss Florence Child, Miss Ethel Cumberlidge, Miss Louisa Greany, Miss Elizabeth Henderson, Miss Madeleine Pike, Miss Amy Robb, Miss Kathleen Rogers, Miss Mary Sinclair, and Miss Elizabeth Slingsby.

*Territorial Force Nursing Service.*—Miss Helen Brotherton and Miss Marion McFall.

*Civil Nursing Service.*—Miss Mary Ainger, Mrs. Annie Downing.

*British Red Cross Society.*—Miss Ethel Hackett, Miss Elizabeth Hopwood, Miss Laura Dew Johnson, Miss Mabel Johnson, Mrs. Grace Leah, Miss Robina Warden.

*St. John's Ambulance Brigade.*—Miss Alexa Ensor.

*Civil and War Hospitals.*—Miss Caroline Martin and Miss Helen Simpson.

*Voluntary Aid Detachment.*—Fede Countess Riccardi-Cubitt, Miss Leonara Hague and Miss Isabel Marshall, Mrs. Jeannie Sinclair.

Queen Alexandra received at Marlborough House the members of the military and civil nursing services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

The King also held an Investiture at Buckingham Palace on March 20th, when he conferred the following decorations:—

## BAR TO THE ROYAL RED CROSS.

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Marian Knox.

## THE ROYAL RED CROSS (FIRST CLASS.)

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Elsie Cassidy, Margaret, Mrs. Fishbourne, Miss Amy Hill and Miss Ethel James.

*Territorial Force Nursing Service.*—Miss Mabel Ensor.

## THE ROYAL RED CROSS (SECOND CLASS.)

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Ruby Craddock and Miss Stella Hepworth.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Marian Armitage, Miss Rosa Beales, Miss Margaret Conway, Miss Susanna Coulter, Miss Ruby Dalzell, Miss Ellen Fewlass, Miss Matilda Fleming, Miss Ada Gamlin, Miss Lucy Gibson, Miss Nellie Hinch, Miss Elizabeth Howitt, and Miss Florence Jackson.

*Territorial Force Nursing Service.*—Miss Edith Ellison, Alvina, Mrs. Fellows, Miss Margaret Hughes, Louie, Mrs. Johnsen, and Edithya, Mrs. Poyntz.

*Civil Nursing Service.*—Miss Ellen Armitage, Miss Kate Freer, Miss Kate Holmes-Hardwicke, Miss Ada Hotchkiss, Miss Lilian Howarth, and Miss Mary Stratton.

*British Red Cross Society.*—Miss Lily Bale, Miss Gladys Bowes, Miss Jessie Boyd, Miss Jessie Brown,

Miss Mabel Foreman, Miss Ethel Goodall, Miss Louise Griffiths, Miss Kathleen Hallett, and Miss Annie Lyon.

*St. John Ambulance Brigade.*—Miss Elizabeth Newitt.

*Civil and War Hospitals.*—Miss Bithia Dudley, Miss Evelyn Edwardes, and Miss Eliza Galpin.

*Voluntary Aid Detachment.*—Miss Edith Arnott, Miss Mary Baxendale, Miss Annie Belling, Miss Emily Carter, Miss Agnes Cooper, Miss Charlotte Dalton, Mary, Mrs. Eltringham, Miss Millie Float, Miss Hilda Forster, Esmah, Mrs. Fry, Julia, Mrs. Hartnett, Jessie, Mrs. Hopkins, and Annie, Mrs. Isaac.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief Q.A.I.M.N.S.), was also received by Her Majesty.

## MEDAILLE DES EPIDEMIES.

The following are among the decorations and medals awarded by the Allied Powers at various dates to the British Forces for distinguished services rendered during the course of the campaign. The King has given unrestricted permission in all cases to wear the decorations and medals in question:—

## CONFERRED BY THE PRESIDENT OF THE FRENCH REPUBLIC.

## MEDAILLE DES EPIDEMIES (EN VERMEIL).

Matron-in-Chief Dame E. M. McCarthy, G.B.E., R.R.C. (late Queen Alexandra's Imp. Mil. Nursing Service).

## MEDAILLE DES EPIDEMIES (EN ARGENT).

Staff Nurse D. E. Howell, Queen Alexandra's Imp. Mil. Nursing Service (Res.); Staff Nurse M. L. Morrell, Queen Alexandra's Imp. Mil. Nursing Service (Res).

## AWARD OF ROYAL RED CROSS (Second Class).

The King has been pleased to award the Royal Red Cross (Second Class) to the following ladies in recognition of their valuable services in connection with the War:—

Miss M. J. Richardson, Sister, Q.A.I.M.N.S.R., Central Mil. Hosp., Cork; Miss D. Roberts, Sister, Spec. Mil. Surg. Hosp., Edmonton; Miss S. E. Roberts, Nurse, Mental Hosp., Berrywood, Northampton; Miss E. M. Roe, Sister, Grove Mil. Hosp., Tooting Grove, Tooting Graveney; Miss G. Rosser, V.A.D., Royal Herbert Hosp., Woolwich.

Miss E. Salisbury, Sister, T.F.N.S., Spec. Mil. Surg. Hosp., Grangehorpe, Manchester; Miss M. Scott, Charge Sister, B.R.C.S., Spec. Hosp. for Officers, Palace Green, London; Mrs. M. J. Sheppard, Sister, Spec. Hosp. for Officers, Latchmere, Ham Common, Surrey; Miss H. Simpson, Sister, Alder Hey Spec. Mil. Surg. Hosp., West Derby, Liverpool; Miss C. J. Smith, Sister, Q.A.I.M.N.S.R., Mil. Hosp., York; Miss J. McK. Smith, Matron, Swindon and District Isolation Hosp., Swindon; Miss A. Stephens, V.A.D., Assist. Nurse, B.R.C.S., Mil. Hosp., Pembroke Dock; Miss M. G. Stewart, Staff Nurse, Q.A.I.M.N.S.R., Mil. Hosp., Fort Pitt, Chatham; Miss M. S. Stuart, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Whittingham, Preston.

Miss A. M. Tabor, Sister, T.F.N.S., 4th London. Gen. Hosp., Denmark Hill; Miss G. Taylor, Sister, T.F.N.S., 5th N. Gen. Hosp., Leicester; Miss G. F. V. Temperley, Sister, Q.A.I.M.N.S., Mil. Hosp., Tidworth; Miss M. A. Thomas, Sister, T.F.N.S., 3rd W. Gen. Hosp., Cardiff; Miss M. Thomas, Sister, the Welsh Met. War Hosp., Whitchurch; Miss M. M. Turner, Sister, T.F. N.S., N. Evington War Hosp.



## THE HOURS OF EMPLOYMENT BILL. "STEALS ON THE EAR THE DISTANT TRIUMPH SONG."

On the invitation of Sir David J. Shackleton, K.C.B., delegates from some of the Nurses' Organisations attended at the Ministry of Labour to discuss the position of nurses under the Hours of Employment Bill, on which there does not appear to be any well considered opinion throughout the profession. Nearly every nurse supports a decrease in the hours of work and a weekly 48 hours is approved, especially for nurses in training who have to devote time daily to study. The question of private nurses' hours is a very difficult one. We understand the N.U.T.N. and the P.U.T.N. both approve of an eight hours' day for private nurses, but how it is to be carried out is the difficulty. One proposal is that hours in excess of the eight should be considered and paid for as overtime, at the end of the case.

We are bound to confess with extensive experience of the management of a Private Nurses' Co-operation, that to enforce this demand would mean a greatly decreased field of work for private nurses; that the public would engage a private nurse who now costs £5 5s. a week in fees and emoluments, and be compelled to attend to the patient for 16 out of a 24 hours' spell is very improbable, and at the present high cost of living the public cannot afford to pay overtime fees. Private nurses are private practitioners, as medical practitioners are, and a give-and-take system appears inevitable between them and their patients. Institution nursing is on a different footing.

We should value expressions of opinion on this difficult question, especially of a constructive character.

### THE NURSES CO-OPERATION.

#### PERSECUTION OF NURSES TO STOP.

The monthly meeting of the Nurses' Co-operation was held at 22, Langham Street, W., on March 16th and those members of the nursing staff who recently suffered dismissal for their convictions may take courage from the fact that their sacrifice has apparently not been in vain.

The proposal to remove two more of the so called "agitators" from the staff was evidently thought inexpedient by the Chairman, Mr. Harold Low, who, on finding the voting on this question equal is reported to have said, "We can have no further removals. This thing must stop." He added that he was sick of all the publicity given to the affairs of the Co-operation by the nurses, but was reminded that it was not the nurses, but Sir Henry Burdett, who first made public the business of the Committee, by expressing his personal opinion on it in his nursing journals.

It was elicited that in the case of one of the impeached nurses, her accuser was Miss Geraldine Bremner (a member of the Committee of the Co-operation, and of the Council of the College of Nursing, Ltd.).

The great Church of St. Martin-in-the-Fields, which the late Sir Robert Laurie Morant, with his family, attended in his life time was filled in every corner on March 17th, for his funeral service.

The principal mourners were Lady Morant, his son and daughter and other members of his family; and Government Departments under which he had held honourable office, and which he had served with heart and soul with so great ability and eager intensity, and others which desired to do him honour, were represented. The Right Hon. Christopher Addison, M.P., Minister of Health, was present; and the Board of Education, the Ministry of Labour, the Medical Research Committee, the Ministry of Munitions, the National Insurance Commission, the National Institute for the Blind, and Toynbee Hall, also sent representatives.

Mrs. Bedford Fenwick attended for the Central Committee for the State Registration of Nurses; Mr. H. J. Paterson, C.B.E., and Miss Isabel Macdonald, for the Royal British Nurses' Association; and the Matrons' Council, the Society for the State Registration of Trained Nurses, and the National Union of Trained Nurses all sent representatives.

The service was fully choral, and was conducted by the vicar, the Rev. H. R. L. Sheppard, assisted by the Rev. H. J. Matthews, who, at the beginning, gave the dominant note:—

"Let us pray:—

"That he may rest in peace, and in the consciousness of a great work accomplished.

"That his wisdom, public spirit, and tireless energy may not fail those who are to continue his work.

"That those whom he loved may be comforted in their hour of distress."

There, in the presence of his mortal remains, under a pall of purple velvet and lovely white and red flowers, the prayers of those who loved and honoured him were uplifted, and who shall doubt that, in his place in Paradise, his spirit was encompassed and comforted by the great wave of intercession and affection which ascended on his behalf to the Throne of God, or that its reflex surrounded and sustained those dear to him on earth, as the glorious lesson of the burial service, and the beautiful music, with their steadying, tranquilising influence, sounded through the church.

The hymns selected were "Forward, be our Watchword"—and; indeed, the word must often have been on the lips of so strenuous a worker—and "For all the Saints who from their labours rest."

"And when the strife is fierce, the warfare long  
Steals on the ear the distant triumph song,  
And hearts are brave again, and arms are strong,  
Alleluia."

Cremation took place afterwards at Golder's Green, and the ashes were interred at Hendon Old Church on March 18th.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## SPECIAL MEETING OF THE GENERAL COUNCIL.

A Special Meeting of the General Council was held on Thursday, 18th inst., when the following Resolutions were put from the Chair and carried by silent upstanding vote:—

"Her Royal Highness the President and the General Council of the Royal British Nurses' Association desire to put on record their deep appreciation of the untiring efforts of the late Sir Robert Morant on behalf of the Nation and of the Nursing Profession. What he has done has earned their lasting gratitude, while his kindness and sympathy will not readily be forgotten.

To Lady Morant and her family they tender this expression of their heartfelt sympathy."

"Her Royal Highness the President and the General Council of the Royal British Nurses' Association desire to convey to the Right Hon. Christopher Addison, Minister of Health, an expression of sincere sympathy in the great loss he has sustained in the death of his Permanent Secretary, Sir Robert Morant."

Her Royal Highness, on behalf of all Members of the Corporation, forwarded copies of the Resolutions to Lady Morant and to the Minister of Health respectively.

Lady Morant has been greatly touched by the many expressions of sympathy she has received. She is deeply grateful to all her friends, and hopes each one will accept this message of thanks personally.

## THE NURSING PAGEANT.

It has been decided to cancel arrangements for the Pageant on the Evolution of Trained Nursing, which was arranged for April 15th, owing to the death of Sir Robert Morant, Chief Permanent Secretary to the Ministry of Health. The amounts sent for tickets will be returned, but the pressure of work at the office is extremely heavy at present, and a few days may elapse before cheques can be forwarded.

## TRAINED NURSES' ANNUITY FUND.

The forty-fifth Annual Report of the Trained Nurses' Annuity Fund has just been published, and shows a very satisfactory year. The sum invested up to October to found fresh Annuities was £5,000. The greater proportion of this was collected by the Nursing Staffs of Military Hospitals. Two Special Annuities have been founded, by the Military Nurses, namely, the Dame Ethel Becher Annuity and the Dame Maude McCarthy Annuity. The nomination of the recipient of the former Annuity will be made by the Matron-in-Chief for the time being at the War Office, while Dame Maude McCarthy will nominate the nurse who shall receive the Annuity connected with her name. Two Annuitants have been granted rooms at the Princess Christian Settlement Home.

The Report indicates that the amount collected towards the second Princess Christian Annuity is steadily growing, and we hope that the Members of the R.B.N.A. will soon complete this. The sum realised from the small Sale of Work held in the autumn was £140. The Report closes with an appreciation of the work of the Chairman, Mr. Montague Price, who has taken such a practical interest in the Fund.

## OUR VICE-PRESIDENTS AND THE HOSPITALS.

Her Royal Highness Princess Beatrice attended a meeting at the Mansion House this week, in support of the Queen's Hospital for Children, Hackney Road. The Lord Mayor presided, and the speakers included the Duchess of Somerset, the Duke of Newcastle, the Bishop of Stepney, the Chief Rabbi, and Colonel Lord William Cecil.

Her Royal Highness Princess Arthur of Connaught has become President of the Samaritan Free Hospital in the room of the late Viscount Portman, who held that office since 1905.

## MARRIAGE.

The wedding recently took place, at St. Dominic's Church, of Mr. John Costello to Miss Ellen Cleland Christie, M.R.B.N.A. Mrs. Costello's fellow members, to many of whom she is well known, unite in wishing her and her husband every happiness.

**MRS. RAIKES, M.R.B.N.A.**

We have pleasure in reproducing this week a photograph of Mrs. Raikes, as we know that many Members of the Association, to whom she is well known, will like to have this, as when, for a morning, we had her photograph in the office, several of them begged us to try and get photographs for them also, before she sailed for Canada. As a compromise, therefore, we had to promise to insert a reproduction in the R.B.N.A. Supplement.

Mrs. Raikes is one of the nurses to whom her profession and her Association owe much. Unostentatiously she has taken part in the management of the latter whenever circumstances made it possible for her to do so. Few nurses have contributed more generously towards financing the cause for the protection of the nurses' liberty and the progress of the profession to which she belongs, while the work which she did for the Trained Nurses' Annuity Fund last autumn saved that Benevolent Fund a large amount of money, and enabled us to have a larger sum to invest as the proceeds of the Sale than would have been possible but for those days and weeks during which she worked so continuously at the accounts and correspondence connected with the Sale. She is back now in her home in Canada, but the memory of her comradeship is still one of "a very sweet savour" among her friends in the R.B.N.A.

Previous to her marriage, Mrs. Raikes, then Miss Hildur Hansen, trained at the King Edward VII Hospital, Cardiff, and was a member of H.R.H. the Princess Christian's Reserve. She joined the Association soon after completing her training. To quote the words of a Matron personally known to us, when speaking of Mrs. Raikes before her marriage, "She was one of the most capable nurses I have ever known, and I have never seen a ward kept in such immaculate order as hers."

While on a voyage to America with her brother she met Colonel, then Mr., Raikes, Chief Surgeon of the Midland Hospital, Ontario, and was married after a short engagement. When war broke out, Colonel Raikes immediately volunteered for service, and he and his wife came to England from Canada. For some time Mrs. Raikes worked in Military

Hospitals in England, but later joined the Q.A.I.M.N.S.R., and acted as Sister, and later as Home Superintendent, in a Military Hospital in Egypt.

When Colonel Raikes returned from work in Military Hospitals in France to take up a home appointment, he expressed the wish that his wife should also return to England, and after this she gave much of her time to her Association. Mrs. Raikes has the fair colouring and blue eyes typical of the Norsewoman, and an elegance and charm of manner which made her always a distinctive personality at our gatherings.

**OBITUARY.**

It is with deep regret that we announce the death of Mrs. Broadfoot, who was a Member of the Council of the Association and took a very keen interest in all branches of its work, and more particularly in its Benevolent Schemes. She was a very welcome visitor always at the Princess Christian Settlement Home.

Previous to her marriage to Judge Broadfoot she trained at the General Hospital, Madras, and at Queen Charlotte's Hospital. We offer to her son and daughter an expression of sincere sympathy.

**DONATIONS.**

The Hon. Treasurer acknowledges with thanks the following donations to the General Fund of the Corporation:—

£3 3s.—Miss C. Liddiatt.  
£2 2s.—Mr. and Mrs. Stewart Murray.

£1 1s.—Mrs. Mackenzie.

£1.—Miss Pulley.

15s.—Misses Pell Smith and E. Scammell.

12s.—Mrs. Rogers.

10s.—Miss Bainbridge, Mrs. Smith, Miss Trew, and Miss G. Macvitie.

8s.—Miss Roberts, R.R.C.

7s. 6d.—Misses Greenstreet and Mawe.

5s. 6d.—Miss Chawner.

5s.—Misses I. Alexander, A. Buckell, E. Chippendale, F. Dunning, C. Foster, E. Hall, C. Little, Milne, Munson, L. Wilson, and Mrs. Sherliker.

4s.—Misses E. Freear, M. Kennedy, S. Sparke.

ISABEL MACDONALD,

Secretary to the Corporation.

10, Orchard Street, London, W. 1.



**MRS. RAIKES, M.R.B.N.A.**

## CONSCIOUS AIM OF TRADE UNIONISM.

Miss E. Maude MacCallum, Hon. Secretary of the Professional Union of Trained Nurses, and Mr. Herbert E. H. Highton, Amalgamated Society of Engineers, were the speakers at a meeting held at the Scottish Nurses' Club, 205, Bath Street, Glasgow, on Friday, March 19th. Dr. McGregor Robertson was in the chair and made it plain that the meeting was not promoted by the club, which was intended to provide a place where all nurses could freely and frankly discuss questions which are at present being considered among them.

### TRADE UNIONISM FOR NURSES.

Miss MacCallum began her address on the above subject by disabusing the minds of her hearers that Trade Unionism was synonymous with strikes, which, she admitted, it was in her own mind until she went thoroughly into the matter. Being a Trade Union meant that instead of being registered under the Companies Acts your Society was registered under the Trades Union Act; the difference was that under the Companies Acts your business was often in the hands of lay people who, no matter how kind or willing to help they might be, very often did not really understand the needs of the people they represented.

Under the Trades Union Act the business of a Society must be managed entirely by the members themselves, that was why, for the first time in their history, nurses had just started a Professional Union of Trained Nurses which had now been registered under the Trades Union Act.

Of Trade Unionism for Nurses there were three different aspects: first, in its relation to the State; second, in respect to the general public as individuals; third, as it affects nurses themselves.

Miss MacCallum remarked that since the dawn of Christianity, and in all probability long before that era, the righteousness of a cause, or the necessity for a reform, could be gauged by the amount of opposition and evil that was stirred up as soon as the question was mooted. The Professional Union of Trained Nurses must have been a much-needed organisation if one might judge from the bitter attacks made on its organisers. Who was afraid of being injured? It would not be the nurses themselves who would be hurt by this action, as their conditions were so bad they could hardly be worse; besides, it was not to be expected that so much wrath should be poured forth just to prevent the nurses from injuring themselves if they wished to do so. There must be some other interest threatened.

Miss MacCallum referred to the need of rest time for nurses, for the benefit of the public as well as the nurse, and of the heavy strain on private nurses because their minds and sympathies were engaged in their work. She read a letter from a district nurse asking that the case of district nurses might be taken up, showing the inadequate payment many of them received, and expressing the opinion that the partially-trained

district nurses were the cause of most of this trouble, as they were "flooding the country-side."

### SOME ASPECTS OF PRESENT-DAY TRADE UNIONISM.

Mr. Herbert E. R. Highton, A.S.E., spoke on the above subject, and said that he did not think the nurses would appeal in vain for help from the workers of this country. He showed the enormous growth of trade unions during the last thirty years. In his own Society—the Amalgamated Society of Engineers—he calculated that 90 per cent. of the possible strength of the engineers was actually in the Society.

One of the striking features about the growth of trade unions in recent years had been not only that of "manual workers" and "skilled tradesmen," but also of the "black-coated professions," including the Draughtsmen's Association (in his own trade), the Actors' Association, the National Unions of Journalists, and of Teachers (headmasters included).

One of the most significant changes was the change in the conscious aim of trade unionism. There was a time when it was solely confined to matters of wages and hours. He was not of opinion that their economic position was all that trade unionists should trouble about, but he did not agree that it should *not* be troubled about, and that they should go on thinking only of their high ideals; because, until the community was willing to give the economic and physical basis of life (and people must have that basis before they could get the ideals they ought to have, or put them into daily practice), mercenary matters must have their proper place.

There had been a distinct advance in the conscious aim of even the ordinary workers in trade unions. They used to be mainly concerned with hours and money, now they were largely concerned with how far they were to have a corporate say in the conditions under which they worked—not merely to drag out of unwilling employers the hours and the wages they wanted, but to have some responsible say in the control of the industry in which they were engaged. To many professional people—and nurses as well as others—this side of the work of a Trade Union ought to be of considerable importance. When it came to claiming this control, all sections of workers found themselves up against a blank wall. The University Lecturer was up against the Senate, the engineers could get no say in the management of the business. The door was shut, and would not yield until either the one side was strong enough to force it, or the other side became a great deal more reasonable than some thought it just now.

### FEVER NURSES' ASSOCIATION.

At the Executive Committee meeting, held on the 15th inst., a sub-committee was appointed to consider the revision of the Association's Syllabus and Schedule. The Annual General Meeting of the Association will be held on Saturday, May 8th next, at Croydon, when Dr. Veitch Clark, M.O.H. for Croydon, will deliver his Presidential Address.

## THE EDITH CAVELL MEMORIAL.

### THE UNVEILING OF THE STATUE.

The Edith Cavell Memorial in St. Martin's Place was unveiled by Queen Alexandra on March 17th just as we were going to press, and we were, therefore, only able to refer very briefly to this historic occasion.

The group around the rough grey granite cross, against which the figure of Edith Cavell was outlined under the British and Belgian flags—the gifts of the Queen Mother and of Her Majesty the Queen of the Belgians—lacked neither picturesqueness nor vivid colouring. The crimson canopy over the gold and crimson chairs, set for the Royal party, the crimson and gold of the robes of the Lord Mayor and Sheriffs of the City of London, the blue robes of the Mayor and Councillors of the Westminster City Council, the khaki of the Guard of Honour, the varied uniforms of the nurses who attended, all contributed to the effective setting of a memorable scene.

Queen Alexandra, who was accompanied by Princess Victoria and attended by Earl Howe (Lord Chamberlain) and other officials, was received on her arrival by the Mayor of Westminster (Viscount Donegall) and the Chairman of the Cavell Memorial Committee (Viscount Burnham) who presented the members of the Committee which, it was incongruous to observe, did not

include one woman. The members of the Belgian Delegation, including General Dr. Maurice Funck, the Matron, Mlle. de Meyer, and a nurse from the Edith Cavell School in Brussels were presented to Her Majesty by the Belgian Ambassador.

Viscount Burnham then thanked Queen Alexandra for consenting to unveil the statue, and gave the following details.

"The monument of grey granite stands 40 ft. high and weighs 175 tons. On the four panels are the words: Humanity, Sacrifice, Devotion, and Fortitude. On the back is the British Lion trampling on a serpent, symbolical of Envy, Spite, Malice and Treachery, and above it are the words: "Faithful unto Death." The statue of white marble, in itself the emblem of Purity, shows Nurse Cavell standing erect in her nurse's uniform. On the base is the simple inscription: "Edith Cavell.

Brussels.

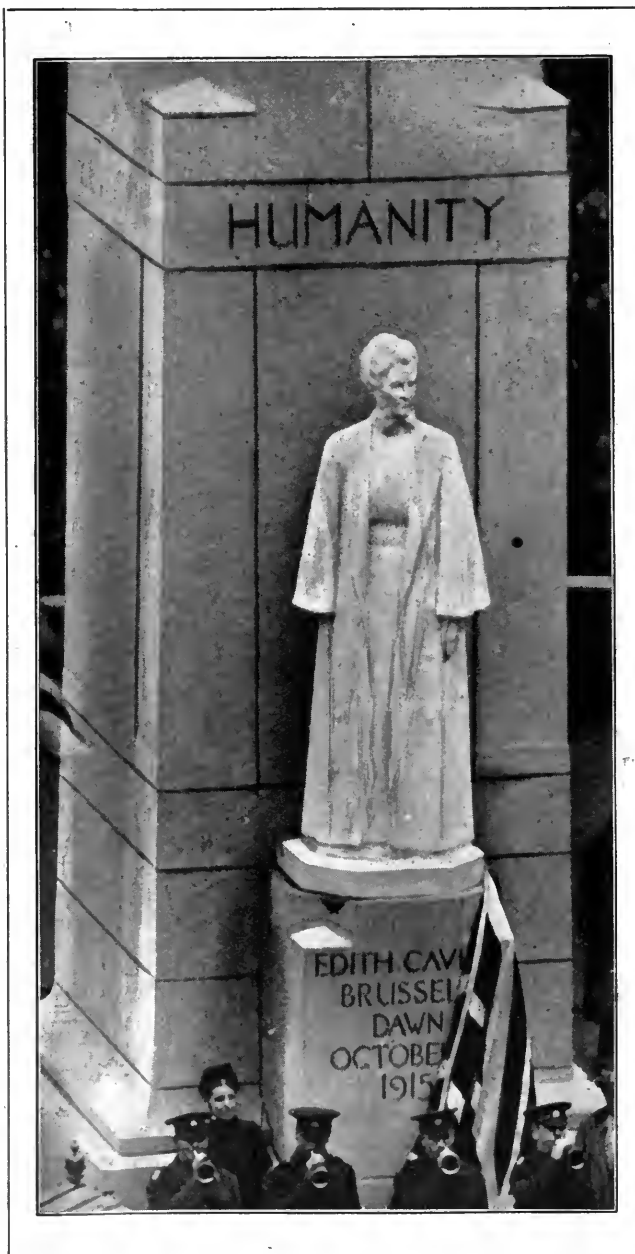
Dawn—

October 12, 1915."

In the course of her reply, which she handed in writing to the Chairman, Queen Alexandra said:

"It gives me the greatest pleasure to unveil this statue and to have the opportunity of expressing my admiration and respect for the memory of that good and brave lady, Nurse Edith Cavell.

"This beautiful statue—the work of our distinguished sculptor, Sir George Frampton—will stand for all time as a memorial of one who met a martyr's fate with calm courage and



THE LAST POST.

resignation which has rarely been excelled, and we recall the beautiful words which, when death was very near, Miss Cavell wrote to a friend:

'Nothing matters when one comes to the last hour but a clear conscience before God. I wish you to know that I was neither afraid nor unhappy, but quite ready to give my life for England.'

"The countless thousands who will pass this spot in our time and in future generations will think with sorrow of her cruel death, with pride of her splendid fortitude, and with affection of her unselfish and womanly character."

"The example of Miss Edith Cavell's life will be always before us, and her name will remain honoured and revered throughout the Empire."

After the Bishop of London, standing at the foot of the steps, had dedicated the statue "to the glory of God, and the immortal memory of Edith Cavell," Queen Alexandra drew the cord handed to her by Sir George Frampton, and simultaneously Miss Beatrice Monk, R.R.C., Matron of the London Hospital, and Miss Beadsmore Smith, R.R.C., Matron-in-Chief of Queen Alexandra's Imperial Military Nursing Service, standing on either side of the steps, also drew cords connected with the flags which fell apart, revealing the white marble statue of Edith Cavell, in her nurse's uniform, against the grey granite background.

The brief ceremony concluded with a verse of the hymn, "Abide with me," played by the band under Lieut.-Colonel Mackenzie Rogan, the "Last Post" and the "Reveille."

The figure of Edith Cavell is a beautiful conception, finely executed, but it is overshadowed and dwarfed by the great mass of granite which forms the background; and the squat figure representing Humanity, surmounting it, is as unpleasing as it is curious. We should like to have seen Sir George Frampton's figure raised on a plinth, so as to be seen on all sides. It would, we think, have gained immeasurably by such treatment.

Much indignation has been expressed, not only by trained nurses, but by members of the public present, that even this occasion was utilized to pass round the money-box for the "Daily Telegraph Shilling Fund," for the endowment of the College of Nursing, Ltd., and its Benevolent Fund. Surely the friends of this Company might have refrained from begging alms from a Trafalgar Square crowd on its behalf on such an occasion.

### THE HOSPITAL WORLD.

Princess Mary paid a private visit to the Belgrave Hospital for Children, Clapham Road, last Saturday afternoon. The Princess went round all the wards, and, stopping at each cot, expressed a kindly word of sympathy with each patient. She also made a tour of the out-patients' department and other parts of the hospital.

Her Royal Highness is beginning to take an active interest in social conditions, as all the Royal Family do.

### TAKING CREDIT FOR THE WORK OF OTHERS.

Miss Cowlin, at the time organising secretary of the College of Nursing, Ltd., has been speaking at Sheffield, Bath and Swansea in its support. We note all the time that the erroneous impression is given that until the College was started there was no attempt to organise the nursing profession. Miss Cowlin is, no doubt, ignorant on the subject, as she did nothing to help in the pioneer movement for reform, but it is distinctly unfair to ignore the truth and mislead the audience. The intelligent and conscientious sections of the profession had won State Registration before ever the lay corporation of the College was incorporated, which determinedly ignored their work. At Sheffield Miss Cowlin pointed out the "needs of a central body with a definite educational policy." Quite so. Every Bill drafted by the Society for the State Registration of Nurses, and the Central Committee, included this provision of a Central Council to define nursing education, and register those nurses who attained the prescribed standard. There is no need of this parrot cry from the College. The Nursing Acts provide such a statutory authority.

At Bath, although Miss Cowlin referred to the "failure" of the Registration Bill to become law she purposely omitted to inform her audience that it was the College Council which obstructed the Bill in the House of Commons, and thus most wickedly risked depriving the profession of State Registration, rather than permit the pioneer Bill to pass. This is an unforgivable act upon the part of the College Council, largely composed of the original "antis."

Replying to a question, the speaker said the State was setting up a general nursing council in connection with State Registration, but the College Register, in her opinion, would be a more reliable register of properly qualified nurses than could otherwise be now compiled.

This attempt to mislead nurses as to the relative value of a statutory and a voluntary Register is as inexcusable as it is stupid.

At Swansea Miss Cowlin again ignored the work of the organised professional nurses, and led her audience to imagine that registration and, in consequence, professional organisation, had never been demanded, until the College Company was formed by laymen in 1916. The Swansea meeting was presided over by Mrs. Moor-Gwyn, and in forming a branch Dr. Lancaster was elected President; and Mrs. Elsworth, Treasurer. Mr. H. Stanley L. Cook has since been appointed Chairman of the Finance Committee.

Where do the nurses come in?

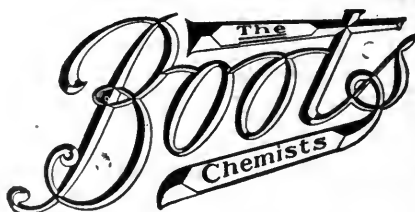
All over the country where local centres of the College are formed lay men and women nobble financial control. This is a very dangerous policy for the nurses. Every profession should control its own financial affairs, otherwise it has no freedom of action.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## THE GENERAL MEDICAL AND GENERAL NURSING COUNCILS.

At a meeting of the Executive Committee of the General Medical Council on February 23rd the President of the Council, Sir Donald MacAlister, reported, as stated in the *British Medical Journal*, that, in response to the request of the Ministry of Health, he had, after consulting the members of the Committee by correspondence, submitted on behalf of the Council the name of Sir Francis Champneys as a member of the Council to be constituted under the Nurses' Registration Act.

Presumably, therefore, Sir Francis Champneys is now convinced of the desirability of Nurses' Registration, the principle of which he has opposed, and signed manifestoes against, for many years past.

## IRISH NURSES' ASSOCIATION.

The Annual Social Re-union of the Irish Nurses' Association was held on St. Patrick's night, March 17th, at the Nurses' Home, Dr. Steevens' Hospital, Dublin, by kind invitation of the President, Miss Reeves, R.R.C. There was a very large attendance, upwards of 200 nurses from various hospitals being present. Miss Reeves entertained her guests to a sumptuous tea, after which a most enjoyable concert was given by several well-known artistes.

During the evening the result of the Ballot for office bearers for the ensuing year was declared, as follows:—

President, Miss Hezlett, R.R.C., Richmond Hospital, Dublin; Vice-President, Miss Carre, "Ivanhoe," Landsown Road; Hon. Secretary, Miss Carson Rae, 34, Stephen's Green.

Executive Committee:—Miss Huxley, Miss Thornton, R.R.C., Miss O'Flynn, Miss Burkett, R.R.C., Mrs. Manning, Miss Haire, Miss Reeves, R.R.C., Miss Hughes, Miss Keating, Miss Haverly, Miss Rhind, Miss S. Blackmore, Miss Downie, Miss Bradburne, R.R.C., Miss Crowther, Miss Harrison, Miss Chisholm, Miss McKinley, Miss McGinley, Miss Drew.

## DOWN WITH DOLES.

Lord Burnham is still thrusting his hateful Shilling Dole Fund upon us, and his colleagues in the country press bleating of his "generosity" in doing so. Generosity, indeed! when every protest is excluded from the *Daily Telegraph* from honourable members of the Nursing Profession. In the past week this pauperising advertisement has been supported by gambling, from raffles and games of bridge, and house-to-house collections by a "Miss Edith A. Mayo, the president of the Seaton Women's Citizen Association," from which we gather it is high time this lady realised what citizenship means! We always imagined a "citizen" was a freeman, a member of a State or nation enjoying political rights and privileges, and not a *pauper*. By what right does Miss Edith A. Mayo venture to beg from door to door on behalf of her fellow-citizens, the trained nurses of

the Empire? We indignantly protest against her depreciation of our economic independence. But every morning we open the *D.T.* to find patronage, folly and sloppy sentiment rampant in the editorial notes of the Shilling Dole Fund, in support of an advertising scoop which should be beneath the dignity of any responsible newspaper.

## APPOINTMENTS.

### MATRON.

**Children's Hospital, Birmingham.**—Miss Agnes Bryant has been appointed Matron. She was trained at the East London Hospital, Shadwell, for three years, and at St. Bartholomew's Hospital, where she was Gold Medallist of her year. Miss Bryant has held the following positions: Assistant Housekeeper, Home Sister, Night Superintendent and Ward Sister at St. Bartholomew's Hospital; Matron, Children's Hospital and Convalescent Home, West Kirby; and Matron, Children's Hospital, Sunderland.

**County Infirmary, Meath.**—Miss M. Duffy has been appointed Matron. She was trained at the Royal City of Dublin Hospital, and has been Matron of Severalls House Red Cross Hospital, Newmarket. She has also had experience of private nursing.

### ASSISTANT MATRON.

**General Infirmary, Leeds.**—Miss Gertrude Bulman has been appointed Assistant Matron. She was trained at the General Infirmary, Leeds, and has been Night Superintendent and also Assistant Matron at the Royal Infirmary, Derby, Sister at the Second Northern General Hospital, Leeds, and on Foreign Service from May, 1915 to March, 1919.

### SISTER.

**Royal Hospital for Sick Children, Aberdeen.**—Miss Winifred Wilson has been appointed Sister. She was trained at the Royal Albert Edward Infirmary, Wigan, and at the Baldovan Institution for Mentally Deficient Children.

### HEALTH VISITOR.

**Borough of Poole.**—Miss A. Morrish has been appointed Health Visitor. She was trained at the London Hospital, E.

**Borough of Shrewsbury.**—Miss Janet Arnott has been appointed Health Visitor. She was trained at the Royal Infirmary, Edinburgh, and has worked under the Kent County Council, and held the position of Charge Nurse in several hospitals. She has also been Sister-in-Charge of Red Cross Hospitals in Perth.

### SUPERINTENDENT NURSE.

**Poor Law Institution, Hoole, Chester.**—Miss M. J. Moss has been appointed Superintendent Nurse. She was trained at the Toxteth Union Infirmary, and has held the position of Sister in the same institution.

## NAVAL MEDICAL MEMORIAL FUND.

We are officially informed that it is proposed to perpetuate, by a suitable memorial, the memory of the Medical Officers, Nursing Sisters, and men of the Sick Berth Staff who were killed or died on service during the war.

The shape the memorial will take will be in strict accordance with the wishes of the majority of the subscribers. Those who wish to subscribe are invited to write to the Hon. Secretary (Surgeon-Commander Bushe, R.N.), Naval Medical Memorial Fund, Medical Department, Admiralty, 1, Lake Buildings, St. James' Park, S.W. 1.

## ASSOCIATION OF TRAINED NURSES IN PUBLIC HEALTH WORK.

A lecture on Clinics and Day Nurseries for the Middle Classes, will be given by Mrs. Paul, at 3.30 p.m., on Saturday, 27th inst, at 10, Orchard Street, W.1. Tickets, tea inclusive, one shilling.

## FACULTY OF INSURANCE.

### NATIONAL HEALTH CONFERENCE.

The Faculty of Insurance has issued the Agenda of its National Health Conference of Insurance Organisations and Social Workers, to be held on Friday, March 26th, at the Central Hall, Westminster.

The Presidential Address will be given by Sir Kingsley Wood, M.P., at 10.45 a.m.

Lord Dawson of Penn, will speak on "The Service of Medicine to the Community."

Lieut. Col. Nathan Raw, C.M.G., M.D., M.P., has "Tuberculosis, a National Problem," for his subject, and after the luncheon interval, at 2.30 Captain Walter E. Elliot, M.P., will speak on "The Tragedy of Human Dumps" (Medical Research in Relation to Waste of Lives).

All these speakers will say something worth hearing.

### NOW IS THE TIME.

When I have time, so many things I'll do  
To make life happier and more fair  
For those whose lives are crowded now with care;  
I'll help to lift them from their low despair,  
When I have time.

Now is the time! Ah, friend, no longer wait  
To scatter loving smiles and words of cheer  
To those around whose lives are now so drear;  
They may not meet you in the coming year—  
Now is the time. ANONYMOUS.

### COMING EVENTS.

March 26th.—National Health Conference, Westminster. 10.45 and 2.30 p.m. Chair, Sir Kingsley Wood, M.P.

March 27th.—The Association of Trained Nurses in Public Health Work: Lecture on "Clinics and Day Nurseries for the Middle Classes," by Mrs. Paul. 10, Orchard Street, W.1. 3.30 p.m. Tickets (tea inclusive), one shilling.

May 4th.—Central Midwives Board Examinations, London, Birmingham, Bristol, Manchester, and Newcastle-on-Tyne. Oral examination a few days later.

### PLEASE NOTICE.

Orders for extra journals and letters on business matters are constantly being sent to the Editor at 20, Upper Wimpole Street, W. All such letters should be addressed to the Manager, B.J.N. Office, 431, Oxford Street, London, W.1, when they will receive prompt attention.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### REPLIES TO CORRESPONDENTS.

*To Our Correspondents.*—As many nurses are enquiring concerning the Rules for Registration, and what steps they should take to conform to the Nurses' Registration Acts, we desire to say that the Rules to be framed under the Act have not yet been made. Notice will be given in this Journal as soon as the Rules are drafted to be laid before Parliament, and when approved, and the General Nursing Councils are prepared to receive applications for Registration.

### KERNELS FROM CORRESPONDENCE.

*Asylum Nurse.*—"I have recently been working in a private asylum. It was heartrending. The poor male patients were spoken to like dogs by the male attendants. Why are these places permitted? Go on pleading for women for the care of mentally afflicted men. I simply could not go on, as I had no power to improve things."

*Sick of Charity.*—"It made me sick to have the hat sent round by the D.T. upon my behalf, at the unveiling of the Cavell Memorial. If I could have got near Queen Alexandra I should have made a protest. We did hiss when the begging box was thrust under our noses. Disgraceful!" (It is a pity our correspondent did not address her protest to Lord Burnham, who was present.—ED.)

*Military Sister.*—"Surely the General Nursing Council, when established, will be able to stop begging from patients and make it 'infamous conduct in a professional respect.' I am another nurse who 'sees red' when I read the *Daily Telegraph*. Why should millionaires of alien antecedents be permitted to violate British susceptibilities? How can they understand our psychology?"

(They can't; but they have learned the lesson that in this materialistic age—cash covers all.—ED.)

*Private Nurse.*—My old training school, King's College Hospital, has for some time past followed the indefensible system of using nurses in their fourth year for profit, as private nurses for the hospital. They are not badly paid, but the principle is wrong. Let us hope when the Ministry of Health has had time to readjust the hospital system—that nurses will not be permitted to be farmed out for the benefit of charitable institutions. The College Council has carefully avoided attacking this abuse; we look to the Nurses Trade Union to do so.

### OUR PRIZE COMPETITIONS.

#### QUESTIONS.

April 3rd.—Express an opinion for or against the use of prophylactic packets for prevention of venereal disease.

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### MONTHLY MEETING.

The Monthly Meeting of the Central Midwives Board was held in the Board Room, 1, Queen Anne's Gate Buildings, Westminster, on Friday, March 19th.

A letter was considered from the Assistant Clerk of the London County Council stating that in many cases the omissions and failures on the part of midwives to observe the Rules of the Board were attributable to the fact that such midwives have undertaken more confinement cases than could be coped with, and suggesting the desirability of limiting the number of cases which a midwife should be allowed to take in the course of a year.

The Board considered it impossible to adopt this suggestion as the number of cases which can be taken in the course of a year by a midwife, without affecting the proper conduct thereof, "depends on factors of a varying nature, such as concentration and dispersal of cases, the normality or otherwise of the cases, the powers of endurance of the midwife, and the like. The procedure for dealing with midwives who neglect their duties is laid down by the Rules of the Board, and in the opinion of the Board is sufficient for the purpose of preventing undue multiplication of cases undertaken."

The Board decided to reply in the affirmative to an inquiry from the Matron of the Leeds Maternity Hospital as to whether it was permissible for pupils to be sent to the Infant Welfare Centre at Leeds, or other Centre of instruction in the care of infants for two or three weeks, and to count such period as part of their training (provided that such attendance does not in any way interfere with their training in the subjects set out in Rule C 5 of the Board's Rules during the period covered by such attendance).

### A DISTINCTIVE BADGE.

In regard to a letter from Miss May Hilton (No. 46099) asking on behalf of herself and other midwives for permission to wear a registered badge designed and approved by the Board, it was decided to reply "that until the Board has evidence that a distinctive Badge is desired by a sufficient number of midwives it prefers to take no steps in the matter."

### APPLICATIONS.

The following applications were granted:—

*For Approval as Lecturer.*—Edward Blythe Hurst Hughes, Esq., L.R.C.P., L.R.C.S., L.F.P.S.; Edward Douglas Whitehead Reid, Esq., M.B.

*For Approval as Teacher.*—Midwife Maude Ethel Walton (No. 28956). (Adjourned application.): (a) Midwives Margaret Clark Chappell (No. 47931), Louisa Mary Lee (No. 4292), Alice

Hortensia Frances Maycock (No. 31266), Kate Claribel Richard (No. 48917), Gertrude Trotter (No. 32520).

(b) (For Workhouse pupils only); Midwife Margaret Ann Richards (No. 36274).

(c) (Pro hac vice): Midwives Mabel Byard (No. 37877), Louisa Margaret Thomas (No. 41370), Eliza Maud Hendry (No. 26574), Catherine Agnes Macdonald (No. 30669).

The Board directed the names of eight Irish Midwives and one Scottish midwife to be entered on the Midwives Roll, and a certificate granted to each of them (the standard of training undergone and the examinations passed by them being equivalent to the standard adopted by the Board) on payment of the fee of one guinea, in accordance with the terms of the Midwives Act, 1918, Section 10.

### EXAMINERS AND LECTURERS.

The List of Examiners submitted by the Secretary was approved to come into force for one year ensuing April 1st next.

The revised List of Lecturers was approved for the same period.

### MIDWIVES CERTIFIED AS TEACHERS.

The present approval of midwives certified as teachers was extended until April 22nd next.

### PENAL CASES.

A special meeting of the Central Midwives Board under the provisions of Rule D 8 was held at 1, Queen Anne's Gate Buildings, Westminster, on Thursday, March 18th, for the hearing of charges against certified midwives when the following midwives were struck off the Roll and their certificates cancelled:—

Louise Blakey, No. 3909; Ann Martin Bragg, No. 13932; Elizabeth Davy, No. 17405; Fanny Royle, No. 14433; Sarah Jane Saville, No. 18914.

Two midwives were also struck off the Roll and their certificates cancelled, as they were found guilty of misconduct in that being single women they gave birth to illegitimate children.

### UNWANTED BABIES.

On Friday, March 19th, by the kindness of Mr. Charles Gulliver, a matinee was held at the Palladium for Mrs. Lloyd George's Fund for Unwanted Children, and she decided that the great bulk of the money received should be devoted to the National Children's Adoption Association, which has opened the Hostel for unwanted babies at "Tower Cressy," Aubrey Road, Campden Hill.

### LONDON COUNTY COUNCIL.

The Midwives Act Committee of the London County Council have appointed Brigadier-General R. J. Cooper, C.B., C.V.O., to be their Chairman and Mrs. May Harmer to be their Vice-Chairman for the ensuing year.

# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### A STATE MEDICAL SERVICE.

A memorandum on a State Medical Service, by Mr. D. T. Jenkins, F.F.I., F.S.S., and Mr. J. A. Newrick, Joint Secretaries of the Association of Approved Societies, 76-78, Swinton Street, Grays Inn Road, W.C. 1, is of great interest at the present time, when so much attention is centred on the working of the National Insurance Acts, and it is of particular importance, because it not only contends that "as a measure to prevent and cure ill-health the National Insurance Acts have failed," but it presents an alternative scheme. It is, in short, not only destructive, but constructive.

The writers claim that the experience gained by Approved Society workers in the administration of National Health Insurance during the past seven years has endowed them with a vivid realisation of the paramount importance of health reform, if we, as a people, are to hold our own physically, mentally, socially, and morally, and that all is not well with us when every year we lose by death, in England alone, nearly a quarter of a million persons under the age of 50, of which number 64,000 are infants.

Again, it is laid down that, without doubt, much crime and vice is due to a state of degeneracy which is largely produced by sickness and ill-health; that good health is the foundation stone of individual and national happiness and prosperity; and that our present machinery for the prevention of disease is hopelessly ineffective.

After discussing these at length, the weaknesses of the present system and the defects of the "so-called medical benefit supplied under the National Insurance Acts," including the lack of nursing and midwifery services, the writers of the Memorandum propose that medical benefit should be lifted from the Insurance Act altogether, if it is to be made at

all effective. It has, they say, been well observed that "there is no connection between a service to insure against ill-health and a service to prevent and cure sickness. The former is surely a matter of finance, averages, and administration, to be carried out on business principles by laymen. The latter is the concern of a learned profession, thoroughly trained in the science of medicine, surgery, and hygiene, matters upon which the laymen have only enough knowledge to be dangerous."

In substitution of existing medical services, it is suggested, as the only solution, that provision should be made for the extension of medical benefits to all persons, male and female, without distinction of rank or class, administered by a separate department of the Ministry of Health, working through the local authorities, who should set up health committees for local administration.

Further, for administrative purposes the country should be divided into convenient areas, each to be provided with a sufficient number of medical practitioners and consultant specialists—full-time, adequately salaried officials—working in a team under the direction of a Chief Medical Officer of Health, who should be responsible to the local health authority or to the Ministry of Health.

It is proposed that sufficient hospital accommodation to meet the needs of the area should also be provided, supplemented by the establishment of a Social Service on the lines existing in many parts of the United States of America, and that each team of doctors should have a sufficient number of full-time nurses and midwives to meet the requirements of the area, also staffs of Health Visitors and Household Helps.

Now that the reconstruction of the Health Services of the country is imminent, a scheme such as that outlined above should receive careful and sympathetic consideration.

### OUR PRIZE COMPETITION.

(a) DESCRIBE FULLY THE VARIETIES OF UTERINE INERTIA; (b) WHAT TREATMENT WOULD YOU ADOPT IN EACH CASE?

We have pleasure in awarding the prize this week to Miss M. E. Ross, 14, St. Thomas Street, S.E. 1.

#### PRIZE PAPER.

There are two varieties of Inertia :—

- (a) Primary,
- (b) Secondary,

but as this nomenclature is apt to lead to confusion, most text-books prefer to class them under the heading of—

- (a) Inertia due to sluggish uterus,
- (b) Inertia due to exhausted uterus.

(a) Inertia due to sluggish uterus :—

The cause of this inertia is obscure, but is said to be due to faulty enervation of the uterus—at all events it is more commonly found in primiparæ. Though the power of retraction is retained, the power of contraction is temporarily lost, thus producing a long, painful labour, with the ultimate risk of exhaustion.

The symptoms are feeble pains and slow progress of the fœtus, the patient presents a tired appearance, and will probably be nervous and worried.

The treatment is to assist nature as much as possible by procuring rest or sleep, after having previously emptied the bladder and rectum. The bag of membranes makes the best dilator, and should be kept unruptured as long as possible.

The drugs commonly used to produce sleep are chloral, bromides, and morphia. A mixture of chloral hydrate (20 grains) and bromide (20 grains) in one ounce of water is said to have a good effect, while morphia ( $\frac{1}{4}$  or  $\frac{1}{8}$  grain) sometimes acts wonderfully in softening the cervix.

After a sleep, or even a period of drowsiness, the uterus is refreshed, and starts again with renewed vigour.

In cases of early rupture of the membranes and sluggish uterus it will be necessary to apply forceps. Sometimes an injection of pituitary extract (1 cc.) obviates the necessity of forceps, but in any case preparation must be made for applying them, if delivery is not effected within thirty minutes after the injection.

In cases of non-dilatation of the cervix which will not yield to hot vaginal douches or drugs, it must be dilated digitally under an anæsthetic, or else a de Ribes bag inserted; also under an anæsthetic, and thereafter forceps applied.

(b) Inertia due to exhausted uterus :—

Here, also, the causation is obscure. It may

be due to faulty enervation of the uterine muscle, but in many cases is associated with a poor physical or mental condition of the patient. It is chiefly confined to multiparæ. Clinically the symptoms presented are :—

1. Absolute cessation of pains.
2. No progress of fœtus.

Pathologically the power of retraction is lost, thus giving rise to a dangerous post-partum hæmorrhage, if delivery be effected or forceps applied, in the absence of retraction.

*Treatment.*—Investigate vaginally to see if there is any cause of obstruction. Procure rest for the patient by drugs—chloral, bromides, or aspirin. By far the most useful drug in this condition is morphia, which should be given early, and in a sufficient dose, either  $\frac{1}{4}$  grain or  $\frac{1}{8}$  grain. If there is any cause of obstruction it must be removed.

The patient rests, then wakes up refreshed, and the uterus resumes work. Forceps must never be applied while the uterus is inert, or there will be an uncontrollable post-partum hæmorrhage.

As regards the child, there is risk attached to both types of inertia, as its vitality is impaired, more especially in cases of early rupture of the membranes.

In cases of extreme distress on the part of the child, labour can be hastened by performing a podalic version.

#### HONOURABLE MENTION.

The following competitors receive honourable mention :—Miss Kathleen A. Fyson, Miss Winifred M. Appleton, Miss Florence M. Heany, Miss A. B. M. Owen, Miss E. A. Walford, Miss M. Gillam, Miss M. Stevens, Miss Grace A. Tomson, Mrs. Farthing.

Miss Grace A. Tomson gives the following possible causes of uterine inertia in the first stage of labour :—(a) loaded rectum; (b) distended bladder; (c) excess of liquor amnii; (d) general weakness of constitution; (e) twins or multiple pregnancy; (f) pendulous abdomen; (g) too early rupture of membranes.

Miss A. B. M. Owen states that in secondary uterine inertia the uterus is tired. The pains which have been good, instead of becoming stronger and more rapid, become weaker, and the intervals between the pains longer. This is not due to obstruction, but to the fact that the contractile power of the uterus is exhausted. A long second stage is invariably the cause of uterine inertia in the third stage of labour.

#### QUESTION FOR NEXT WEEK.

Express an opinion for or against the use of prophylactic packets for prevention of venereal disease.



## NURSING ECHOES.

We have very sincere pleasure in reporting that Miss Elma Smith, the very popular Matron of the Colindale Hospital, who underwent a serious operation last week, and has been dangerously ill for a few days, is delighting her nurses and friends by her powers of recovery, and there is now every hope that she will make a good convalescence. During her long and honourable service as Matron of the Hendon Infirmary, now Hospital, Miss Elma Smith has greatly endeared herself to several generations of pupils, and to hundreds of sick people. We cannot afford, in these days, to lose any of the courageous women who have spent themselves and their money in winning the Nursing Acts, and helping to found the Profession of Nursing. Miss Smith became a member of the R.B.N.A. in 1888, and has worked splendidly for Registration since that day to this, and we cannot spare her now in the day of Victory.

We have received from Miss Antoinette E. Schuller, the Editor of the C.L.S.A. Nurses' League, a copy of its 1919 League Journal, which contains an excellent portrait of this lady as a frontispiece, which her fellow nurses will be charmed to receive.

The City of Westminster Infirmary, Hendon, is no longer a Poor Law Nursing Training School. The fine building has been taken over by the Metropolitan Asylums Board, working with the Ministry of Health, and is to be used for the treatment of tuberculosis, where very up-to-date treatment will be under the supervision of the new Medical Superintendent, Dr. Marcus Paterson. It is rumoured that the building is to be enlarged to accommodate more beds, and this will necessitate extending the Nurses' Home for the increase of staff. Much interest has been shown in the new arrangement by past nurses, who are anxious to return to Hendon and forward the work.

The Guardians have decided for the future to present a silver medal to the nurse who heads the examination list, and a bronze one to the second.

The beautiful Memorial Tablet erected for the nurses who fell in the war was placed in position in the Home at the end of the year, and is still waiting for the unveiling ceremony, which, together with the General Meeting of the League, is postponed owing to the sudden illness of the President, Miss Elma Smith. Not for long, let us hope. The League Journal contains interesting "War Records" of the work of the members.

A very sympathetic article appears from the pen of Miss L. C. Cooper, who is now engaged in Health Visiting, and is evidently an ardent lover of babies, or she could not write of them so tenderly:—

"I have just witnessed the death of one of my babies—the sweetest, prettiest, well-cared-for and loved baby in the district, just ten months old.

I had thought that in my district there should be no Infant Mortality, but my conceit is gone. Alas; I felt so certain that if I watched over my mothers and babies, and worked hard, that my little ones would be enabled to grow up strong, healthy citizens, able to lead good, useful lives, but God still moves in mysterious ways, His wonders to perform, and it appears to me as though the beautiful Temple not made with hands, and the many mansions which are being prepared for us cannot be built altogether of jasper, gold and precious stones, but inasmuch as His only Son became the corner stone, so the beautiful carvings and work must be filled in by our own priceless treasures, and when each one is called home it must be because He is just ready for that bit of his own handiwork, and that this sweet babe, in perfect health and beauty, is filling an important niche in the Temple of God. As I think this I become less bitter, more humble and not so ready to give up in despair."

There are other interesting articles in this Journal, and it is very well edited and produced.

A fire in an institution containing blind men is a terrifying ordeal, and 150 blinded soldiers and sailors were in bed at St. Dunstan's Hostel, Regent's Park, N.W., when a fire broke out in the linen room in the early hours of Friday, March 26th. Their discipline stood them in good stead, and they dressed coolly and quickly, and were then conducted by the Matron and V.A.D. nurses to the lounge in the west wing, where they remained until the fire was got under.

About fifty V.A.D.'s were sleeping on the top floor, and they made a hurried escape down the emergency iron staircase, many of them only having time to put on shoes and wrap themselves in cloaks over their night attire. Two of them (Miss Effie Grevilink and Miss Esme Collingwood) sustained bruises, and Miss Sava Frankland was discovered lying under a bed in one of the rooms, overcome by smoke, and unconscious. She was removed to the Middlesex Hospital, where, we are glad to learn, she progressed favourably.

The fire was extinguished in two hours, but the linen room was destroyed, and the ward beneath and the passages were badly damaged.

The General Hospital, Birmingham, is a very

fine institution, and we regret to note from the annual report that it has a deficit of £18,000 on last year's expenditure, which should not be in so wealthy a city.

The report states that owing to the continued shortage of probationers the number of the Nurses has been much below the authorised number throughout the year, and this has thrown a great strain upon the existing nursing staff, to whom the Board wish to express their gratitude for the way in which they have met the extra work thrown upon them. With the fine clinical material admitted to the General, Birmingham, probationers have every facility for the best practical experience in the wards, and there should not be a shortage, but we hear on all sides that the type of girl who makes the best nurse is not applying for training, even in our best Nursing Schools, in sufficient numbers.

Once the General Nursing Council is at work we should like to see a campaign commenced throughout the country, conducted by women who know and love their profession—its history and its future possibilities—addressed to young womanhood, inviting them to form and build up the profession of the future. A sort of Nursing Revival, such as swept over the country in the seventies and eighties. Our girls are as good as ever they were. We must make them realise that Nursing is fine work—including the nursing of women and children!

Sister D. M. Davies, the first nurse to receive the Gold Medal now offered annually by the Hospital, has, the report states, "been awarded a Scholarship by the Royal College of Nursing." We presume the College of Nursing, Ltd., is the organization referred to. No doubt Mr. T. Ratcliffe, the Chairman, has bestowed the prefix "Royal" upon the College Company in error. To give such honourable distinction used to be the prerogative of the Sovereign; but we live in democratic days!

The position to which Miss Edith Haslam has been appointed in Newfoundland, as notified in our Appointments column, is a pioneer and interesting one under the Government. She will be stationed, in the first instance, at St. John's, where the first infant welfare centre will be opened, and will be responsible for organising the health visiting throughout the island, where there are at present one doctor and three community nurses. Miss Haslam has excellent qualifications for the position, and we wish her all success in her interesting sphere of work.

## PADDINGTON AND ST. MARYLEBONE DISTRICT NURSING ASSOCIATION.

The Annual Meeting of the Paddington and St. Marylebone District Nursing Association (affiliated to Queen Victoria's Jubilee Institute), held on Wednesday, March 24th, in the Lecture Hall, St. James' Church, Westbourne Terrace, Paddington, was of particular interest and cordiality, as not only subscribers, but a number of the patients were present.

The Vicar of the parish, the Rev. E. N. Sharpe, was in the chair, and moved the adoption of the Report. Mrs. Mylne, who seconded, stated that the Association was adopting a system to relieve people of small means, and they hoped to supply nurses to such persons at three shillings an hour. They were also trying to raise a sum of money to buy a new Home, and money for this purpose, and furniture to equip the Home would be gratefully received. The Report was adopted by a show of hands.

Mr. Pett Ridge moved a resolution that the meeting asked for support for the nursing of the sick poor in both boroughs, and for the expenses of the new Home. The speaker remarked on the changing conditions and circumstances of many people of recent years, the purest cockney was heard in first-class carriages, and one looked out of one's back windows on to cases suitable for assistance by the Association. The new poor were not vociferous, they had to be searched for and dealt with carefully by gentle cross-examination and tact. Incidentally he remarked that if tact were put up for sale, only those who already possessed it would make a bid for it.

Dr. Porter, Medical Officer of Health for Marylebone, spoke in high terms of the work done by the Superintendent, Miss S. Marsters, and the nurses.

Dr. Raymond Dudfield, Medical Officer of Health for Paddington, said the work of the nurses of the Association relieved the hospitals, and was of the greatest public benefit. It resulted in the saving of life, and benefited the nation as a whole. There were bound to be considerable changes when the duties of Boards of Guardians were handed over to the Local Sanitary Authorities (the Borough Councils), and the work of the District Nurses would be extended.

The Rev. Dehane Small moved a vote of thanks to the Superintendent and nurses. Much had been said of their courtesy; he would like to bear testimony to their efficiency, and re-

ferred specially to the work of Miss Marsters at the head of a tube station during the raids. There were far too few thanks for those who deserved them.

Dr. Akindor, Paddington, seconded the resolution, which was carried by loud acclamation, and Miss Marsters briefly responded. She spoke of the pleasure of having at the meeting, for the first time, many of those among whom they worked, and of the efforts they made to support the Association, not only by unsolicited donations from sixpence to a pound, which had resulted in £150 being received during the year from this source, but both patients and their friends helped enormously in preparing for the visits of the nurses. Without such assistance the nurses could not visit so many cases. Eight nurses on the staff paid 600 to 700 visits a week in the homes of the patients, not counting others engaged in minor ailment treatment centres and other work.

At the conclusion of the meeting tea was served by the nursing staff in a manner which was an object lesson in their efficiency. A collection taken at the door amounted to between £3 and £4.

## TO PRIVATE NURSES.

It is being urged by some Nurses' Organizations that Nurses should be included in the Hours of Employment Bill (No. 2), which will be considered after Easter, and that the hours of Private Nurses shall be restricted to eight daily. As the majority of Private Nurses we have consulted are opposed to inclusion in the Bill, their reasons being (1) that it is impracticable, (2) it would deprive them of work, and (3) it would prevent them caring for their patients efficiently, we shall be obliged if Private Nurses will send a post card, addressed to the Editor, *B.J.N.*, 20, Upper Wimpole Street, London, W. 1, expressing their opinion on the question, which is of vital interest to them. State whether in favour or not, of inclusion in the Bill, and give reasons. A few words will suffice and card must be signed and address given.

## AN INFORMAL INVESTITURE.

The King gave great pleasure when he visited Manchester last Saturday, in the course of his visit to the Grangethorpe Military Hospital, by decorating four members of the nursing staff with the Royal Red Cross.

His Majesty was received at the hospital by Dr. C. A. Lees (Medical Superintendent) and Miss A. Woodhouse (Matron), and after visiting the wards, and the curative workshops, held an

informal investiture in front of the hospital, and decorated Sister Hooper, Staff Nurse Sheila and Staff Nurse Diorden for service abroad, and Sister E. Salisbury for home service, with the Royal Red Cross (second class).

## HONOURS FOR NURSES.

### ROYAL RED CROSS.

The King held an investiture at Buckingham Palace on March 24th, when the following ladies were decorated with the Royal Red Cross.

#### BAR TO THE ROYAL RED CROSS.

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Clara Chadwick, Miss Lavinia Steen, and Miss Sarah Wilshaw.

#### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Mary Clements, and Miss Annie Plimsaul.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Mrs. Charlotte Graven, Miss Elsie Gascoigne, and Miss Henrietta Walde.

*Territorial Force Nursing Service.*—Miss Margaret Cummins and Miss Jane Hannah.

*Civil Nursing Service.*—Miss Gertrude Montgomery.

*British Red Cross Society.*—Miss Martha Whent.

*Civil Hospital Reserve.*—Miss Annie Duncan.

#### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Margaret Baxter, Miss Mabel Gregson, Miss Isabella Ingles, Miss Lucy Kelly, Miss Mary Lavie, Miss Anne Macandrew, Miss Lizzie May, Miss Clare Morrin, Miss Isabella Patrick, Mrs. Helen Penney, Mrs. Louisa Price, Mrs. Bertha Priestley, Miss Bessie Taylor, Miss Gwendoline Thomas, Miss Helena Tompkins, Miss Kate Wallbank, and Miss Emily Williamson.

*Territorial Force Nursing Service.*—Miss Margaret Johnston, Miss Ethel Midgley, Miss Mary Paul, and Miss Edith Smeeton.

*Civil Nursing Service.*—Miss Muriel Cox, Miss Sarah Jubb, Mrs. Mary Mundy, Miss Ethel Skerratt, and Miss Grace Walford.

*British Red Cross Society.*—Miss Marion Pidcock-Henzel, Mrs. Cora Mayne, Miss Jessie Millar, Mrs. Una Dawson-Pattison, Miss Evelyn Pinkerton, Mrs. Alice Scott, Miss Gertrude Sutton, Miss Mary Wilson, and Miss Florence Wren.

*St. John Ambulance Association.*—Miss Mary Peter.

*Civil and War Hospitals.*—Miss Anne Carr, Miss Elizabeth Jones, Miss Eliza Myers, Mrs. Bertha Parry, Miss Winifred Taylor, and Miss Madge Williams.

*Voluntary Aid Detachment.*—Miss Dorothy Jobson, Miss Annie Kearney, Mrs. Zoe Longdon, Miss Lornetta Roskill, Mrs. Gertrude Ross, Mrs. Marion Saddler, the Hon. Mrs. Eva John Trefusis, Miss Myrtle Wigram, and Miss Violet Wigram.

The King also held an Investiture at Buckingham Palace on March 25th, when he conferred the following decorations.

#### BAR TO THE ROYAL RED CROSS.

Miss Amy Knaggs, *Queen Alexandra's Imperial Military Nursing Service.*

#### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Cecilia Harries and Miss Katherine Bulman.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Kate Chapman.

*Territorial Force Nursing Service.*—Miss Elizabeth Humphries.

*Civil Nursing Service.*—Phyllis, Mrs. Dry, and Miss Laura Holroyde.

*Voluntary Aid-Detachment.*—Josephine, Mrs. Latter, and Maude, Lady Fox-Symons.

#### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Helen King, and Miss Mabel Kinkead.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Annie Clarke, Miss Caroline Clements, Miss Edith Cooke, Miss Christiana Dimmock, Miss Gertrude Fuller, Miss Grace Gilfillan, Miss Betty Hacker, Miss Florence Hepburn, Miss Harriet Howard, Miss Evelyn Johnson, Miss Anne Langley, Miss Ida Leedam, Miss Phoebe Le Gassick, Miss Lilian Leigh, Miss Alice Letts, Miss Amy Lewis, Miss Bessie Lidstone, Miss Daisy Lynch, and Elizabeth, Mrs. Rickard.

*Territorial Force Nursing Service.*—Miss Margaret Dow-Bain, Miss Eliza Bradshaw, Miss Muriel Bulteel, Miss Annie Cameron, Miss Fanny Eggington, Miss Mary Harris, Miss Mary Haynes, Miss Elizabeth Hobday, Miss Matilda Kitteringham, Miss Sarah Leavesley, Miss Jean Lyle, and Mabel, Mrs. Quarumby.

*Civil Nursing Service.*—Miss Mary Bean, Miss Rosa Cooper, Miss Enid George, Miss Edith Gooderham, and Miss Agnes Lawlor.

*British Red Cross Society.*—Miss Mary Holbech, Marguerite, Mrs. Johnston, Miss Margaret Kirk, and Miss Isobel Morrison.

*Voluntary Aid Detachment.*—Miss Dorothy Ashbridge, Miss Grizel Bayley, Miss Helen Brownrigg, Miss Claudine Douglas, Miss Constance Germon, Mildred, Mrs. Gray, Janet, Mrs. Hallsmith, Miss Susanne Harries, Miss Edith Drummond-Hay, Miss Laura Lamonby, Miss Hilda Lee, Miss Elizabeth Lewis, Miss Muriel Maberley, Miss Isabella Megson, Miss Josephine Laing, Gertrude, Mrs. Ravenscroft, Miss Marion Sedgwick, and Mabel, Mrs. Barr-Stevens.

Queen Alexandra received at Marlborough House the Members of the Military and Civil Nursing Services who were awarded the Royal Red Cross, subsequent to the Investitures at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron in Chief, Q.A.I.M.N.S.), was also received by Her Majesty.

The King has been pleased to award the Royal Red Cross (Second Class) to the following Ladies in recognition of their valuable services in connection with the war:—

Miss E. Watson, Sister, Q.A.I.M.N.S.R., Mil. Hosp., Prees Heath, Salop; Miss L. G. Watts, Sister, Q.A.I.M.N.S.R., the Lord Derby War Hosp., Warrington; Miss M. G. Welch, Sister, Bermondsey Mil. Hosp., Ladywell; Miss E. M. Whittall, Sister, Q.A.I.M.N.S., R. Victoria Hosp., Netley; Miss M. Whyte, Matron, the Rutland Hosp. for Officers, 16, Arlington Street, London; Miss G. Wilkinson, Act. Sister, Q.A.I.M.N.S.R., Mil. Hosp., Chisledon Camp, Wilts; Miss M. T. Wilman, Sister, T.F.N.S., 3rd S. Gen. Hosp., Oxford; Miss K. Wright, Acting Sister, Met. Hosp., Kingsland Road., London.

Miss E. Yates, Staff Nurse, Q.A.I.M.N.S.R., Mil. Hosp., Pembroke Dock; Miss E. Younger-Smith, Sister, Q.A.I.M.N.S.R. Mil. Hosp., Bevington Camp Wood.

#### CANADIAN ARMY MEDICAL CORPS.

Miss C. Powell, Matron Massey-Harris Convalescent Home for Canadian Soldiers, Kingswood, Dulwich.

## QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

The Council of Queen Victoria's Jubilee Institute for Nurses met at 58, Victoria Street, S.W. 1, last week. The Earl of Athlone presided and reported that Her Majesty Queen Alexandra had been graciously pleased to make appointments on the Council for the three years commencing March 31st, 1920.

Sir Harold Boulton and Sir William Cameron Gull were re-elected Chairman and Vice-Chairman of the Council and the Earl of Athlone and Mr. Francis W. Pixley were re-elected Hon. Treasurers, and the Countess of March, Mrs. Bruce Richmond and Mr. D. F. Pennant Hon. Secretaries.

The Executive Committee for the ensuing year was also appointed, consisting chiefly of members representing the affiliated Associations, the Superintendents of the Queen's Nurses, and other Societies carrying on work analogous to that of the Institute.

The Council consists of 78 persons of social position, medical men, and five nurses.

Miss Rosalind Paget.

Miss Amy Hughes.

Dame Sarah Swift (Nation's Fund for Nurses).

Miss G. Vaughan, (Superintendents of Training Homes, England, Wales and Ireland.)

Miss Wheeley, (Superintendents of Affiliated County Nursing Associations.)

#### NURSING ASSOCIATIONS AND THE MINISTRY OF HEALTH.

CAPTAIN REGINALD TERRELL recently asked the Minister of Health if he would state what reasons had actuated him in refusing the request of the Council of the Queen Victoria's Jubilee Institute for Nurses that representatives of the county nursing associations and of the Institute should be appointed on certain of the consultative councils under his Department.—DR. ADDISON replied: The total membership of a consultative council is restricted by Order in Council to 20, and I regret that within this limit it was not found possible to include persons having the special type of knowledge and experience in question in the Council on Medical and Allied Services. I am hoping, however, to have the advantage of their assistance on any committee of the council appointed to consider the future organisation of nursing services.

#### EXAMINATION QUESTIONS.

The following are the questions set in the examination for the Roll of Queen's Nurses on March 18th, 1920.

1. (a) What do you mean by ventilation?  
(b) How much carbonic acid gas is there in ordinary air, and how much in expired air? (c) What happens to hot air?

2. What symptoms would cause you to fear an attack of eclampsia in your patient? What feature does this disease present and how would you deal with a case pending the arrival of the doctor?

3. State carefully the mistakes that a young mother is likely to make in artificially feeding her first baby from a month to a year old. How would you (1) recognise and (2) avoid them?

4. You are sent to a man suffering from phthisis (advanced) in a four-roomed house, where there are four children and the mother as well as the patient. What should you do for the patient and what for the protection of the family?

5. Give a list of articles required for the lending cupboard of a district, with approximated cost of appliances, and how would you obtain them if you had not what you think is necessary? State also how you would clean and store rubber tubing, water pillows, ice bags, mackintosh sheeting and flannel shirts.

6A. What recent public measures have been adopted to decrease the mortality of measles amongst children? To what extent can district nurses co-operate with these measures?

or

6B. To what extent and from what sources would you obtain extra nourishment during sickness for: (a) Disabled soldier or sailor. (b) War widow. (c) Marasmic baby. (d) Phthisis patient. (e) An old age pensioner. (f) Labourer's wife ill with pneumonia.

## THE FLORENCE NIGHTINGALE CENTENNIAL.

Florence Nightingale was born on May 12th, 1820, in the Villa Columbaia, near the Porta Roma, at Florence, the City of Flowers, and already arrangements are being made in the United States by the National Organisation for Public Health Nursing and other groups of American Nurses for the celebration of the Florence Nightingale Centennial. An outline for a series of tableaux portraying events in the life of the Queen of Nurses has been arranged in such a way that amateurs can easily produce them.

The newly-organised Central Council for Nursing Education in Chicago—says *The American Journal of Nursing*—has offered a prize of 500 dollars for the best three-act play by an American author, based on incidents in the life of Florence Nightingale. The Americans are indeed a very enterprising people!

The centennial of Florence Nightingale will certainly not pass unobserved in her own country. It would be interesting to know how best we can honour her memory, as she herself would have approved it.

The General Purposes Committee of the London County Council recommend that nurses who regularly assist in post-mortem examinations shall be paid, in addition to their ordinary remuneration, £2 10s. a quarter at those mental hospitals accommodating over 2,000 patients, and £1 5s. a quarter at other hospitals.

## NURSING IN PARLIAMENT.

### NURSES' REGISTRATION ACT (COUNCIL).

On March 24th Mr. Grundy asked the Minister of Health whether he can give an assurance that in the appointment of the first Council under the Nurses' Registration Act there will be included representatives directly nominated by *bonâ fide* nurses' trade unions, as distinct from associations presumed to cater for nurses, but directed and controlled by persons other than nurses?

DR. ADDISON: Under the Schedule to the Act I am bound to consult, and I have consulted, three organisations specifically named and such other associations or organised bodies of nurses or Matrons as ask to be consulted. No organisation is given the right of direct nomination to the General Nursing Council. The invitations in connection with the membership of the Council will be issued to-morrow;

The selection of the sixteen nurses and the five other persons—a duty deputed to the Minister of Health in the Schedule to the Nurses' Registration Act—has been by no means an easy task, as all classes of persons, including groups of employers, have persistently urged their claims to representation on the Registered Nurses' Governing Body—the General Nursing Council. Thus it was considered only fair by the Labour Party that the Nurses' Trade Union group should not be excluded from helping to frame the Rules they would have to obey, a very active attempt to exclude them having been made by supporters of the College of Nursing, Ltd.

### CHAIRMAN AND COUNCIL OF COLLEGE OF NURSING, LTD.,

#### INTERFERENCE WITH LIBERTY OF ACTION OF NURSE MEMBERS.

In reply to a communication sent to the Secretary of the College of Nursing, Ltd., asking if it had officially advised members not to join a trade union, the following letter was received:—

"My dear Sir,—In reply to your letter of the 18th ult., I have to say that Sir Arthur Stanley, in a circular letter written as Chairman of the Council of the College of Nursing, stated that it was, in his opinion, inadvisable for a Nurse who is a member of the College to join a Professional Trade Union. Similar advice has been given at Headquarters to a Nurse who enquired as to membership of the 'Poor Law Trade Union,' by which, no doubt, she meant 'The Poor Law Workers' Trade Union.'

"Yours truly,

"(Signed) M. S. RUNDLE,

Secretary.

This interference with the liberty of action of nurse members of the College is quite consistent with its usual autocratic government—and is by

no means the first time that it has shown its reactionary spirit—(1) When it practically forbade nurses to sign the Petition to the Prime Minister, asking for the direct representation of organised nurses on the General Nursing Council to be set up in a Nurses' Registration Act; and (2) Advising nurses to get their Members of Parliament to obstruct (wreck) the Nurses' Registration Bill on the Report Stage in the House of Commons last June. The menace to the freedom of the whole Nursing Profession, by the control of thousands of uninstructed and dependent nurses who are willing to be used against its progress and best interests by this oligarchy, is a very lively danger which must be vigilantly watched, exposed and opposed.

### EDINBURGH NURSES' CLUB.

Miss M. F. Gordon, Lady Superintendent of the above Club, writes us with regard to the Note referring to the Club which appeared in our issue of March 20th, and states:—

"Your correspondent has evidently not made herself conversant with these conditions as she is in error in both points.

"(1) The Club is open to all nurses, and membership is not confined to members of the College of Nursing, Ltd.

"(2) Applicants for membership or for accommodation are *not* asked to join the College when joining the Club. Should an applicant be a member of the College her attention is drawn to the fact that it would be more advantageous to her to join the Centre before joining the Club, as she would then enjoy the privileges of the Centre as well as those of the Club at less expense.

"I enclose the conditions of membership and of admission to the Club for your information."

Our former correspondent wrote:—"A good deal of feeling has been aroused amongst nurses in Edinburgh, who think the new Club should like that of Glasgow be free to all nurses." and added: "The application for rooms is answered by a request to the applicant to join the College."

Upon carefully reading the Rules of the Edinburgh Nurses' Club, we gather that it is not open to all nurses *on equal terms*.

1. On the "Application for membership" the first question is:—

Are you a member of the Edinburgh Centre of the College of Nursing, Ltd.?

2. Under heading of "Subscription," the first intimation is:—

Members of the Edinburgh Centre, 7s. 6d. for one year; or of other Centres of the College of Nursing, Ltd., 5s. for six months. Entrance fee, 5s.

For other Trained Nurses, 10s. 6d. for one year; 7s. 6d. for six months. Entrance fee 5s.

So that "other trained nurses" pay 10s. 6d. per annum, and College Nurses, 7s. 6d.

Then we note that a room on the first floor (we are informed it is the drawing-room) is set apart

for the use of the members of the College of Nursing, Ltd.

These are the vexatious inequalities resented by Edinburgh nurses who do not wish to be forced to join the College.

In Glasgow, at the Scottish Nurses' Club, no privileges are secured to members of the Scottish Nurses' Association who founded it—all nurses are treated, as they should be, on an equality.

The question arises—was the Edinburgh Club, as was the Glasgow Club, founded largely on benefactions from the general public "for trained nurses"? Or was the money specially donated to the College of Nursing, Ltd.? If the latter was the case, then it should be entirely reserved for members of the College; and if not, it should be thrown open on *equal terms* to all trained nurses who conform to the professional requirements. The sort of "Peri outside Paradise" treatment of non-College members, so far as the Drawing-room is concerned, is in any case quite unjustifiable.

For the future let us hope all "Registered Nurses" to whatever Societies they belong, will be treated on an equality, and unity and good fellowship encouraged throughout the profession.

### APPOINTMENTS.

#### MATRON.

**Johnson Hospital, Spalding.**—Miss Ethel Foster has been appointed Matron. She was trained at the West Norfolk and King's Lynn Hospital, where she was also Night Sister, and Acting Matron. She has also been Matron of Barham Isolation Hospital, Ipswich.

**Royal Asylum, Aberdeen.**—Miss J. Finlayson Mackenzie has been appointed Matron. She was trained at the Western Infirmary, Glasgow, and has held the position of Assistant Matron at the Crichton Royal Institution, Dumfries, Matron of the Red Cross Auxiliary Hospital, Dumfries, and Assistant Matron at the Royal Asylum, Montrose.

#### SISTER.

**Royal Infirmary, Chester.**—Miss Gladys Luke has been appointed Housekeeping and Out-patient Department Sister. She was trained at the South Devon and East Cornwall Hospital, Plymouth, and has held Sisters' posts for four years.

Miss Dorothy Hartland has been appointed Sister of the Pensioners' Ward. She was trained at the Royal Infirmary, Gloucester, was a member of Q.A.I.M.N.S.R., and saw war service as a Sister both at home and abroad.

Miss Dorothy Tomlinson, has been appointed Sister, she was trained at the Royal Infirmary, Liverpool, and has served in Q.A.I.M.N.S.R.

Miss Emma Jackson, also appointed Sister, was trained at the General Hospital, Birmingham, and holds I.S.T.M. and Fever Hospital certificates.

#### INFANT WELFARE ORGANIZER.

**Infant Welfare Centre, Newfoundland.**—Miss Edith Haslam has been selected to organise Infant Welfare work in Newfoundland. She was trained at the Mill Road Infirmary, Liverpool, and served in France with the American Red Cross. For the past year she has been engaged in Infant Welfare Work in London. Miss Haslam is a Certified Midwife, and holds the



certificate of the Royal Sanitary Institute as a Health Visitor. She is a Registered Nurse in the State of Philadelphia, U.S.A.

#### MASSEUSE.

**Chester Royal Infirmary.**—Miss Nora Peck has been appointed Masseuse. She was trained at University College Hospital, London, and holds I.S.T.M., and Medical Electricity Certificates.

Miss Leila Howard has been appointed Assistant Masseuse.

#### WEDDING BELLS.

Miss C. A. Padbury, R.R.C., Assistant Superintendent of School Nurses in the Public Health Department of the London County Council, is shortly to be married. Her fiancé is from overseas, and after her marriage she will remain in the service of the Council until the necessary arrangements can be made for her sea-passage with her husband, which may be some little time.

The splendid work done by Sister Padbury for blinded soldiers at No. 2 General Hospital, Chelsea, T.F.N.S., is well known, and very many friends will wish her and her fiancé much happiness in their married life.

#### THE PASSING BELL.

We greatly regret to record the deaths of two members of the League of St. Bartholomew's Hospital Nurses—Miss A. E. Holmes (Cert. 1907), who worked during the war as a member of Q.A.I.M.N.S.R., and who passed away on March 20th, and Miss E. G. Beard (Cert. 1915) who died at the Royal Naval Hospital, Haslar, on March 24th. We offer our sincere sympathy to their relatives.

### THE HOSPITAL WORLD.

His Royal Highness Prince Albert has become President of the Queen's Hospital for Children, Hackney Road, London, N.E., which provides treatment in sickness and accident to over 40,000 children, making over 108,000 attendances in the course of a year. The good work done by the hospital in a very poor neighbourhood, and the economy exercised in its administration, are well known, and it is deserving of all support.

The bazaar recently held at St. Bartholomew's Hospital by the Women's Guild of that institution, proved a decided success. There were no expenses, and the result is that the sum of £3,200 has already been handed over.

#### THE ROYAL INFIRMARY, CHESTER.

The Chester Royal Infirmary has been reorganising following the withdrawal of the soldiers. Wards have been opened for eye and other special departments, an Orthopaedic Clinic established, and definite provision is to be made for paying patients. A new Children's Ward has also been opened on the second floor of the renovated old wing, with a roof balcony adjoining, and commanding an uninterrupted view of the Welsh hills.

On the ward being allotted to the children, two friends of the charity, Dr. J. George Taylor (Hon. Physician) and Mr. W. Heathcote Williams, offered to take it over and to hand it back

decorated, furnished and equipped. The offer was gratefully accepted by the Board, and the outcome is a ward as attractive as art can make it, with every modern appliance and convenience, the delight of all visitors.

The walls and ceiling are enamelled, with a high dado surmounted by a 10 in. panel and a deep frieze, both of nursery patterns. New firegrates have nursery rhyme panels above, and over the balcony door are leaded light window panels. New electric fittings and additional heating in the Sanitary Annexe have been installed, and twenty latest pattern cots, a complete equipment of bedding and linen, instruments, nursery and all other furniture and domestic utensils, and the furnishing of the Sister's Room, are included in the gift.

The Ward was dedicated on March 9th by the Bishop of Chester (Dr. H. L. Paget).

A suggestion has been taken up by the local Press that Chester should raise an Endowment Fund of £10,000 for the Ward, in addition to the Memorial Cross which is to be erected in the centre of the city. The donors of the ward offer, if this is done, to regard their gift as part of the War Memorial.

The hours of duty and salaries of the Nursing Staff have been revised. The Day Staff have been granted one day in seven off duty, and Night Nurses have three consecutive nights off duty per month. Salaries of Ward Sisters have been raised to £52—£55—£62, and of Nurses to first year £18, second year £22, third year £26, fourth year £35.

### ANNUAL CONFERENCE FACULTY OF INSURANCE.

Sir Kingsley Wood, M.P. (Parliamentary Private Secretary to the Minister of Health), presided at the Annual Conference of the Faculty of Insurance, held throughout Friday, March 26th, at the Central Hall, Westminster, which was attended by delegates from local authorities, insurance committees, and social organisations.

In the course of his Presidential Address Sir Kingsley Wood announced that legislation could be anticipated which would deal with the hospital problem as part of the general health problem. At present hospital provision was notoriously inadequate, and its financial resources precarious. In the past it had been nobody's business to provide hospitals, and the voluntary hospitals had often been dumped down in unsuitable places, and there were great gaps in hospital provision. Without any blow at existing voluntary hospitals others must be provided where they were sorely needed. Centres and clinics, the aim of which would be preventive, must also be established, to diminish the number of patients now going straight to the hospitals.

The proposed legislation would deal with the hospital problem as part of the general health

problem, and would give the Minister of Health power to link existing institutions with the local health services, and to make further and better general provisions especially for women and children.

Dr. Addison had come to a great decision in deciding to deal with tuberculosis as a whole instead of tinkering with it under National Insurance. A bigger fight would also have to be put up against venereal disease, which was the cause of half the lunacy and blindness of the country, and a vast number of infant deaths. The mistaken policy of secrecy had largely broken down.

The Minister of Health intended to introduce legislation—it was hoped this Session—unifying and conferring proper health powers on suitable local authorities, and reforming the Poor Law.

The next speaker, Mr. Smith, of the Manchester Co-operative Society, prefaced his remarks by recording his pleasure and satisfaction at the passing of the Nurses' Registration Acts. He advocated the establishment of a Nursing Service for the Insured Sick which, he said, could be arranged by a payment of 1d. per member. Manchester was making a start in this direction by arranging co-ordination of the various voluntary agencies.

Lieut.-Colonel Raw, C.M.G., M.D., M.P., speaking on "Tuberculosis, a National Problem," laid stress on the fact that this disease was preventable and curable, and never hereditary. He urged early diagnosis, the establishment of additional sanatoria, of village settlements, of improved housing conditions, and a great propaganda movement throughout the country.

Captain W. E. Elliot, M.P., M.C., dealing with "The Tragedy of Human Dumps" (Medical Research in relation to waste lives), claimed in support of medical research that scientists had added five years to the life of man since the Franco-Prussian war, and this was worth £8,000,000,000.

Sir Kingsley Wood, in summing up, commenting on a remark made that the Ministry of Health had already done great things *except* on the housing question, said that in connection with that also it had done much, in spite of the difficulties encountered, and expected to have 100,000 new houses in a year's time. He advised that little notice should be taken of the daily Press, which was often inspired by interested motives.

In regard to the future of Voluntary Hospitals, the Minister of Health wanted them, he said, to continue for the present, and to be incorporated in the Ministry's scheme. Also, for the present, a State Medical Service was not suggested; in fact, no change was contemplated which would lead to controversy.

In regard to the nurses Sir Kingsley Wood said it was hoped to improve their standard and pay. They had been most inadequately paid in the past, and when the salary of a nurse was less than that of a skilled cook, you could not expect to attract the best type of woman to the profession.

## BOOK OF THE WEEK.

### THE SOUL OF ANN RUTLEDGE: ABRAHAM LINCOLN'S ROMANCE.\*

The charm of this romance cannot be gainsaid, nor can the grace and distinction of its literary worth. It is full of strong and tender passages, which permeate it with fragrance.

Abraham Lincoln and the beautiful character of Ann Rutledge are, of course, the central theme.

The reader is caught in the atmosphere of nearly a century back—in the environment of the States in that period—in the early spring, and in the fanatical religious fervour of the time.

Ann herself is associated with springtime, of which she herself is part and parcel, with a natural faith and trustfulness, and with pure love.

What an alluring picture is drawn of her as she stands with her arms full of white plum blossom, with a background of open garden, of meadow, a glimpse of forest further back, and over it all the white-flecked, spring-blue sky.

"In the foreground stood a slender girl in a pink-sprigged calico dress. Her violet eyes were shaded with dark lashes. Her shapely head was crowned with a wealth of golden hair in which a glint of red seemed hiding. A white kerchief was pinned low about her neck, and across her breast were tied the white strings of a ruffled bonnet which dropped on her shoulders behind."

A merry, laughing girl, in spite of, or rather because of, her imaginative faculties and her simple piety.

She asks her more everyday friend—

"Say, Nance, do sounds make you think of smells?"

"I never thought of such a thing."

"Don't cow bells make you think of hay and dandelions and grass and the smell of the cow lot in the evening?" And don't bees and honey-lucust and robins and apple blossoms go together? I could name a hundred sounds that have smells for partners."

It was that she first saw Abraham Lincoln amid the flowering plum blossom, that its association seems interwoven with their subsequent love.

It was Abraham's first glimpse of her as he sailed down the river in the boat that he had released from the mud amid the cheers of the villagers. Ann shook her branches of wild plum.

"The boat sailed on. To those on board who looked back a few moments later the mill and the dam were resolving themselves into an indistinct patch of gray and brown, against which a bit of pink waving something white stood out.

"It was a few days later, after Abraham Lincoln had entered service to split rails for a new pair of breeches, he came to town late one afternoon to get an axe.

While yet rounding the bluff he heard the barking of a dog and then the tinkle of a cow-bell. Then a human voice was heard, a woman's voice,

\* By Bernie Bacock. J. B. Lippincott Co., London.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

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that seemed to burst suddenly into the flower of a full-blown song.

"I'm a pilgrim, and I'm a stranger  
I can tarry, I can tarry but a night."

The youth leaned forward and listened breathlessly. But the voice was dying and the tinkle of the bell came on the stillness, faint as a memory."

It was the voice of Ann, his "little pilgrim," as he learned to call her. It was characteristic of Abraham to win his way in spite of obstacles, and there is a very human picture of his holding Ann's hand beneath the quilt at the quilting-bee, regardless of the fact that she was pledged to John McNeil.

"A look of surprise showed on Ann's face as she whispered, 'Turn loose of my hand.'"

"I can't, I've got to hold on to somethin'. I'm afraid of women."

For a moment or two her hand was held in prison. Once more he whispered,

"Afraid of women, am I, little Ann Rutledge?"

An instant she lifted her eyes to his. He had never known they were such beautiful violet blue."

Though her tender conscience was hurt, she forgave him gravely afterwards. Later, when she is free to accept Abe's love, what a charming episode is drawn of her sitting by the brook with her lover crowned with her May Queen's wreath, while Abraham tells her he is finding his way to God through her.

"Let us leave the Queen's crown on her throne," and he took the wreath from her and put it on the stone where she had been sitting.

How pathetic the account of the girl's death, two months later, as she dies in her lover's arms.

"You want the pilgrim song?"

"Yes, my little pilgrim that is mine. Can you sing it?"

"Yes, indeed, and I want to."

"*I can tarry, I can tarry but a night.*"

"Ann! Ann! what's the matter, Ann?"

Warm and close she lay in his arms like a little child, but she was silent."

In his agony of spirit he revisits the throne on which he had laid the May Day crown.

"You will come back to me. We will have our little home. Oh, Ann! Ann!"

He dropped his face against the faded leaves."

The last picture of him is by her grave.

"Whether he were praying there, or weeping or struggling for the grace of resignation, none might know, for no sound came from his lips. But on the edge of the wood he stood with his sad grey eyes turned to the little mound of earth, but he lifted them from the mound to a cloud bank rimmed with silver. "Soul of Ann Rutledge—yes, I believe!"

H. H.

#### COMING EVENTS.

April 16th.—Society for the State Registration of Nurses. Meeting Executive Committee, 431, Oxford Street, London, W. 4 p.m.

## "THE IMITATION OF CHRIST."

### THE EDITH CAVELL EDITION.

Most of us have our favourite edition of the "Imitation of Christ" which we would not willingly exchange for any other. The wonderful little volume in four books by Thomas Haemmerlein (A Kempis), who was born at Kempen, in Germany, in 1380, was first published in Latin about 1470, and in English in 1677. Probably next to the sacred writings no book has been so much beloved by Christians of all countries and nationalities. It is a book of deep spirituality, of quiet serenity, and those most deeply permeated by its spirit radiate the peace which passes all understanding, and the joy which no man taketh from them.

There has recently been published by Mr. Humphrey Milford, of the Oxford University Press, Amen Corner, London, E.C., in the pocket edition of the World's Classics, price 2s. 6d. net, an edition which Bishop Ryle, Dean of Westminster, who contributes the Foreword, describes as "a rare treasure." "This little edition of the 'Imitation of Christ' is a facsimile of the copy which belonged to Edith Cavell, and which she had with her in the prison of St. Gilles in Brussels. Two months intervened between her arrest on August 5th, 1915, and her court martial on October 7th and 8th. . . . During the long, lonely period of her imprisonment, as well as during the last three days of dreadful expectancy, she used this little book. You can see reproduced in these pages the markings that she made at different times against passages which she found especially helpful and comforting."

The personal markings in a book are always intimate and sacred. They are specially poignant in this one, which consoled Edith Cavell in those last hours of preparation for a violent death. In it she wrote her last message to her mother.

Here are some of the marked passages:—

"Occasions of adversity best discover how great virtue or strength each one hath."

"For occasions do not make a man frail, but they show what he is."

"Thou must pass through fire and water before thou come to the place of refreshing."

"It were more just that thou shouldst accuse thyself, and excuse thy brother."

"Keep close to Jesus both in life and death, and commit thyself unto His trust, who, when all fail, can alone help thee."

"After winter followeth summer, after night the day returneth, and after a tempest a great calm."

The book is dedicated to Queen Alexandra.

### A WORD FOR THE WEEK.

TRUTH PREVAILS.

"It fortifies my soul to know that though I perish truth is so."

Arthur Hugh Clough.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## TRADE UNIONISM AND STRIKES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Free discussion on such matters as trade unionism and strikes, as suggested by Miss Klaassen, should certainly help nurses to form stronger views and perhaps encourage more of them to think for themselves.

Miss Klaassen's statement that without strikes "the nation would have been ill-fed and have deteriorated and become weak and poor" does not coincide with my point of view.

I think the nation *has* been ill-fed and has deteriorated in consequence; and that instead of being part of an organised plan of reform, strikes were the *result* of evil conditions.

It seems to me that drastic action on the part of the oppressed indicates reckless defiance, flaming up from the smouldering of misery and hopelessness created by past grievances, and ignited by the "last straw" of a new burden which may be small in itself.

Upon such occasions we cannot expect the ear to be sensitive to platitudes on the sufferings of *others*, the mind being totally absorbed in its own.

In referring to "cruel" strikes, Miss Klaassen must mean those which apparently cause more suffering than usual to helpless outsiders. I consider all strikes are equally cruel; but there is no doubt that to the average mind, sudden calamities (such as the death of a patient resulting from lack of attention) make more impression than protracted suffering (such as total destruction of a child's health leading on to contagious disease, resulting from semi-starvation of an already impoverished system).

It is also unfortunately true that many easy going people, with little or no imagination, are prompt in "drawing away" the sympathy they are not capable of feeling from any and every class of strikers without distinction or inquiry.

Now, trade unionism is the medium by which we hope to make strikes, not unlawful, but unnecessary in order to secure all reasonable claims. We desire to make negotiations between employers and employees before misery drowns the voice of the peace maker and dulls the point of argument; and whilst hope is still enthroned. Recklessness and defiance might then be left in the shadows of our undisciplined past.

Such is our aim. The attainment depends not so much on the officials of our unions, as upon the driving force, and that force is guided by members but weakened by non-members.

Those who pride themselves on their lofty views should lose no time in adding to our driving force.

The principles of trade unionism are truly Christian, being bound up in the common brotherhood of man and the protection of the weak; and in the ever-increasing chain of societies which are linked together in this common bond, no link could be more appropriate than that of the nursing profession, which should enhance the whole chain by its solidity and completeness.

Yours faithfully,

THERESA McGRATH.

45, Lloyd Street South,  
Manchester.

## KERNELS FROM CORRESPONDENCE.

## PRIVATE NURSES AND THE HOURS OF EMPLOYMENT BILL.

*Private Nurse, London:* "I hope Private Nurses who realise the danger foreshadowed in your remarks last week, will not sit supine as usual, and have their work taken away from them by Act of Parliament in the Hours of Employment Bill. I have been a Private Nurse for fifteen years, taking my fee of £2 2s. (now £3 3s.) a week, less a small percentage, and in that time although I began without a penny, I have saved enough on which to retire in comfort. Sometimes I have worked twelve hours, sometimes longer; at others I have travelled with patients, seen foreign countries, and had a really good time. 'Give and take,' as you say. I wish to put it on record that I have been very generously treated by the majority of patients, and have a dozen places where I can spend a holiday, free of expense. If we are to have 'collective bargaining' in private work I for one shall try to evade it."

*Member R.N.S.:* "I do hope we private nurses may be left in peace to do our duty by the sick and not be legislated for in the Hours of Employment Act. I have saved £500 in the few years I have been on the staff of the R.N.S. and enjoyed good holidays each year."

*F. E. B. Mussoon, India:* "I have been quite excited over reading all the news about the passing of the Nurses' Registration Act, and the subsequent meeting. I wish a miracle would happen to dissolve that wretched College of Nursing, Ltd., before it makes us any more ashamed."

["*Nurse Juliet*" has been the very last straw. Trained Nurses bitterly resent the D.T. appeal through this bogus mannequin.—ED.]

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*April 10th.*—What is Uræmia? When does it occur? Give the symptoms and general management of this condition.

*April 17th.*—How would you recognise perforation in a case of enteric fever? What immediate action would you take, and how could you temporarily relieve the patient?

# The Midwife.

## THE LEWISHAM MATERNITY HOME.

The Lewisham Borough Council is indeed to be congratulated on its splendid Maternity Home. This was the first of its kind to be initiated, and was opened by Her Majesty Queen Mary, on June 1st, 1918.

The Council were fortunate enough to secure a residence, formerly occupied by a medical practitioner, and which was easily adapted.

It is situated in the main road, about the centre of the borough, so being within easy access for all residents who are anxious to avail themselves of the comfort and care so easily obtained.

There is a spacious hall, and from it lead off a large nurses' dining room, the clinic room (in which, daily, babies are weighed and their progress watched until they are five years old).

There is also the doctor's consultation room, the Matron's office; and, leading out of these, the examination room and dispensary.

Passing up the staircase, which is tastefully decorated with dark-brown "Lin-crusta" and oak panelling, one comes to the wards. These are three in number, very bright and cheery, with their pale-green washed walls and white enamel paint; white beds with swinging cots fitted at the foot of each bed and hung with white frills. Each ward contains four beds and a cheery fire is kept burning for the convalescent patients who are allowed to remain up.

There is a beautifully equipped labour ward on the same floor, and also the Matron's bed-sitting room. On the second floor are the nurses' and maids' bed rooms and large store cupboards.

There is a good-sized garden at the back of the house, and at the end stands the laundry. This was formerly the stable and garage.

Each patient contributes to the upkeep of the Home, according to her husband's income, and many an anxious time has been avoided by securing a vacancy.

Unfortunately, the applications far exceed the number that can be accommodated; but it is hoped in a very short time to enlarge the Home and also to open a crèche, where the babies may be daily cared for whilst the mother helps to swell the income, to cope with the high expenses of the present day.

Several homes to be conducted on similar lines will in due course be opened in various parts of the country, and anyone desirous of viewing the Home and of obtaining any useful information will be welcome by appointment with the Matron, Miss F. Murby, Lewisham and Catford Maternity Home, Bushey Green, Catford.

Such homes should be most useful factors amongst the agencies for raising the national health.

## THE ASSOCIATION FOR PROMOTING THE TRAINING AND SUPPLY OF MIDWIVES.

The Annual Meeting of the Association for Promoting the Training and Supply of Midwives was held on March 24th at 23, Cromwell Road, South Kensington, by kind permission of Mrs. S. Bruce. Lieut.-Colonel Fremantle, M.P., L.C.C., Consulting Medical Officer for Hertfordshire, was in the chair, and the adoption of the Annual Report was moved by Mrs. Ebdon (Chairman of the Executive Committee).

The Report stated that the principal matters which have occupied the attention of the Committee have been the consideration of the measures taken by the Board of Education, and the work entailed in providing a wider field for the training of the Association's candidates. It is further stated that after many years of happy associations with the Plaistow authorities the Committee found it necessary to terminate their Agreement, and although still sending a few of their candidates to East Ham, the Home is no longer an integral part of the scheme of the Association. The candidates accepted this year have been trained at the City of London Maternity Hospital, the East End Mothers' Home, the East Ham Home, Lady Holland's Maternity Home, Leicester Maternity Hospital, Liverpool Maternity Hospital, Worcester Nursing Institution, and York Road General Lying-in Hospital.

Twenty-three pupils have entered training during the year, some to work as independent midwives, and others under County Associations. The applications received for training were 639 in number, nearly 400 in excess of those received last year, but many of those discharged from war work merely wished to obtain the Central Midwives Board Certificate, and others, on investigation, proved quite unfit to take up this profession.

Miss Ford, who for many years held the position of Secretary to the Association, resigned to the deep regret of the Committee, to take up other work in September last. The office has been filled by the appointment of Miss Ethel B. Grant.

We understand that the grant to the Midwives' Institute, reported in the press as "a welcome gift from the British Red Cross Society," was, more accurately, a grant from the Central Council for Infant and Child Welfare, which is composed of two representatives of each of the associated societies and six representatives of the British Red Cross Society. The grant was made from the proceeds of the "Victory" Ball last autumn. The offices of the Central Council are at 20, Berkeley Street, W., next to the new offices of the British Red Cross Society, and Sir Arthur Stanley is its chairman.



# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### THE GENERAL NURSING COUNCIL.

We greatly hope that before another issue of this Journal appears the Minister of Health will have announced the constitution of the General Nursing Council for England and Wales, and that his appointments may give general satisfaction.

It will be realised that his task has been a somewhat difficult one, owing to the various schools of thought in the Nursing Profession, and the long continued demand of influential managers of training schools to govern nurses who are not in their employment. Dr. Addison has promised that he will "do his best," and it is well that we should realise the difficulties of his position.

We presume the Minister of Health is cognisant of the diversity of thought amongst certain sections of nurses, and that in "doing his best" he will provide that each of these sections has representation on the Council.

The first of these sections is the creative and progressive group standing for solidarity and professional co-operation. To this group, inspired by professional conscience, must be awarded the credit of initiating and voicing the demand for the protection of the sick from spurious nursing, and for higher education and better economic conditions for trained nurses. This group, while encouraging social evolution amongst nurses, has determinedly demanded the Registration of Trained Nurses by the State, knowing full well that without the strong arm of the law behind organisation no security is possible in regard to improvements achieved. Its members demand organisation on lines ensuring self-government, self-support, and self-respect, and they object to public charity for their profession, because they are well aware that charity and sound economic government are incompatible.

The final efforts and exposition of their

policy are demonstrated in the Central Committee for the State Registration of Nurses, in which are federated—with the British Medical Association—the Royal British Nurses' Association, the Matrons' Council of Great Britain and Ireland, the Society for the State Registration of Trained Nurses, the National Union of Trained Nurses, the Fever Nurses' Association, the Scottish Nurses' Association, the Irish Nurses' Association, and the Irish Nursing Board, some of which have, for over a quarter of a century, worked consistently for State Registration of Nurses. To their untiring efforts the triumph of the evolution of the profession of nursing is undoubtedly due.

This reasoning group of persons, whose expert professional opinion as to nursing organisation is the outcome of many years' work in this connection, have always been opposed by the majority of the lay governors of the voluntary hospitals. This reactionary group, together with the higher officials in their employment, maintained, for many years, a *non possumus* attitude in regard to State Registration of Nurses, and declined not only to co-operate with those promoting this reform, but opposed every effort made to secure the self-government of the Nursing Profession. This section is now grouped under the title of the College of Nursing, Ltd., which originally attempted to thrust its obsolete policy of voluntary registration on the nursing world, but was compelled to realise that it was only by supporting the principle of registration by the State that it could continue to exist at all.

It therefore adopted the shibboleth of "State Recognition," whatever that may mean, but fought strenuously for power under the Nurses' Registration Acts, so that the control of the Nursing Profession might be practically in the hands of the Boards and officials of Nursing Schools.

There is a strong objection to the ethics of

the College of Nursing, Ltd., upon the part of the intelligent members of the profession, to its lay control, and to its charity propaganda through which it is absolutely impossible to build up a self-governing, self-supporting and self-respecting body of women.

The day, however, is past when trained nurses can be governed without their consent, and although thousands of young women, ignorant of economic and political questions, find it convenient to support the policy of those in authority over them, there has arisen an intelligent minority which thinks for itself.

This minority is co-operating on trade union principles, and its organisation, the Professional Union of Trained Nurses, is now registered under the Trades Union Act, and has thus thrown in its lot with the Labour Party.

It is to be anticipated that all these three groups will have representation upon the General Nursing Council, and if their representatives are persons in whom their supporters have confidence there should be no difficulty in their working together for the benefit of the Nursing Profession as a whole and the sick whom it serves.

### I AM WONDERING.

There was a woman in the hospital to-day—  
One of the kind with satin slippers and Ideal perfume;  
And she thought we were "wonderful" and "truly angels of mercy."  
She would "just love to be a nurse."  
And now I am wondering—  
I am wondering just how much she would love  
Those three years of training;  
With the terrible feeling about three o'clock in the morning  
That you must sleep or die.  
The worry on tonsil night for fear some youngster may hemorrhage.  
The Hamburg steak and poor coffee at midnight supper;  
The getting up during the day for lectures.  
And the out-patient service where you go down into the slums  
To help some Italian or Polish woman have her baby.  
And the operating room where you stand for hours on a tiled floor  
And serve an exacting surgeon—  
And then polish the instruments and wash blood-soaked linen.  
And, after graduating, the living in a suit-case,  
With the constant companionship of a sick person—day and night.  
And men taking the attitude of "but I can tell you"—  
"You understand things of that sort."  
I am wondering just how much she would love it.

VIRGINIA GRIFFITHS,  
*Pacific Coast Journal of Nursing.*

## OUR PRIZE COMPETITION.

WHAT IS URÆMIA? WHEN DOES IT OCCUR? GIVE THE SYMPTOMS AND GENERAL MANAGEMENT OF THIS CONDITION.

We have pleasure in awarding the prize this week to Miss S. F. Rossiter, Sisters' Quarters, Royal Naval Hospital, Chatham.

### PRIZE PAPER.

Uræmia is a condition caused by the accumulation and circulation in the system of urea and waste products that should normally be eliminated by the function of the kidneys.

Therefore any disease or injury interfering with this process of elimination may result in uræmia. The commonest cause is nephritis (Bright's disease). This may be acute or chronic.

*Acute nephritis* may occur at any age, and frequently follows scarlet fever or diphtheria. The prognosis is most favourable in the very young.

*Chronic nephritis* generally occurs late in life, and may be resultant on an early acute attack, or due to degeneracy of connective tissue of kidney from various causes, e.g., alcoholism, lead-poisoning, syphilis.

*Functional interference* during pregnancy and injury to uterus may also give rise to uræmia, the symptoms of which may be divided into three groups, as follows:—

1. *Cerebral*.—Headache, impairment of vision, delirium, mania, coma, deafness and convulsions.

2. *Gastric*.—Vomiting, diarrhœa, smell of urine in breath.

3. *Pulmonary*.—Air-hunger, dyspnœa.  
These symptoms may again be divided into acute and chronic.

1. *Acute*.—Convulsions or uræmic eclampsia, much resembling epilepsy (but not preceded by aura), subsiding into coma. There may be a number of convulsions intervened by periods of coma. This should give cause for greater anxiety than a single severe attack. During the spasm pupils are dilated, the face is livid, and there is frothing at the mouth.

2. *Chronic*.—Headache, vomiting, dyspnœa, diarrhœa, stupor, and twitching of muscles.

The treatment should aim at immediate elimination of the toxins causing the symptoms, and the methods employed are diaphoresis, diuresis, and free purgation.

*Diaphoresis* may be assisted by hot-air baths, hot packs, hot sponging, and any treatment which stimulates the action of the skin. Pilo-

carpin administered hypodermically (if ordered by the doctor) acts upon the sudoriferous glands. A bowl and towel should always be at hand if this drug is used, as increased salivation and sometimes vomiting takes place. Shock or collapse must be carefully watched for during any of the above treatment.

*Diuresis* is assisted by free liquid diet, which should be of a light, demulcent nature to avoid irritation of the renal system, barley water being generally given. If honey be given in small quantities it will be found sufficient with barley water to keep up metabolism for quite a prolonged period, the chief advantage of the honey being its easy assimilation.

*Croton oil* and *jalap* are the *purgatives* commonly used—these producing liquid stools in from six to eight hours, or sooner. The blood pressure is usually high, and blood-letting by venesection is often performed, and from ten ounces to one pint withdrawn. Pulmonary symptoms are often relieved by steam inhalation, *e.g.*, steam kettles in tent; this also assists in keeping up diaphoresis.

Bed clothing should be light but warm, with blankets next to patient.

When sweating has been produced, if the patient's general condition permits, the skin should be quickly rubbed down with *hot* towels, and warm, dry garments given. During the hot-air bath or pack hot drinks may be given, unless there be nausea from the administration of pilocarpin.

The mouth should receive special attention, and a few grains of tartaric acid added to the preparation used for cleansing it will be found to keep same moist by stimulating the salivary glands.

During convalescence red meats and any article of diet that might tend to increase the blood pressure must be avoided. Draughts must be guarded against, as chill to patient in this condition might prove fatal.

All urine passed must be measured, and amount recorded daily.

Specimens should be taken from the 24-hourly bulk for examination purposes.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Adeline Douglas, Miss M. Cullen, Miss S. A. Cross, Miss Alice Overshott, Miss Eliza Noble, Miss J. Bevis, Miss M. White.

#### QUESTION FOR NEXT WEEK.

How would you recognise perforation in a case of enteric fever? What immediate action would you take, and how could you temporarily relieve the patient?

## NURSING ECHOES.

The resignation by Miss Beatrice Cutler of the position of Assistant Matron of St. Bartholomew's Hospital, which she has held for thirteen years, means a very great loss to the hospital generally. A genial and progressive woman, with plenty of moral courage, her colleagues recognise that her place will be hard to fill. We learn, however, that the appointment of Miss Helen T. Baines, who at present holds the position of Matron's Office Sister, to succeed Miss Cutler, has given great pleasure to her fellow nurses, with whom she is very popular. She is a "Bart's" woman, and a Gold Medallist of its Nursing School, and has given faithful service to the hospital and the school for eleven years. Miss Baines was recently elected Secretary to the League of St. Bartholomew's Hospital Nurses—evidence of her personal popularity. She has consistently supported the principle of State Registration of Trained Nurses by Act of Parliament, and will, let us hope, live to see the organisation and up-lifting of her profession as the result of the legal status recently bestowed upon its members.

We hope our review of "The Life of Sir Victor Horsley" will be read, and his fine work appreciated. He was one of the consistent registrationists who fought valiantly for us, as he did for all unpopular movements, the value of which he was convinced was for the good of mankind. What a champion for progress he would have been as a member of the General Nursing Council! Alas! we shall not have the benefit of his help, but let us not forget how much he did in life to win for nurses legal status and power to help themselves.

May we remind our kind correspondents that this journal is edited by two trained nurses—Mrs. Bedford Fenwick and Miss Margaret Breay—not by a "Dear Sir." No "Sir," however "dear," is qualified to control the ethical standards and voice the aspirations and policy of a profession to which he does not belong.

We learn from the 147th Annual Report of the Leicester Royal Infirmary that the Board is considering how this fine hospital can be enlarged, and has given instructions to its architect to prepare plans for increasing the available accommodation for nurses as well as for patients to meet its future needs. Several munificent contributions are acknowledged.

The executors of the late Mr. T. G. Langham,

a well-known Leicestershire grazier, have expressed a wish to provide a worthy memorial at the Leicester Royal Infirmary, and have indicated their readiness to contribute a sum of not less than £20,000 (it may be more) for a building to be called the "Langham" Memorial.

The Joint Committee of the British Red Cross Society and the Order of St. John of Jerusalem have granted a sum of £10,000 for the provision of an Orthopædic Ward or additional accommodation for nurses.

The Committee of the Leicester, Leicestershire and Rutland Prisoners' of War Parcels Fund have generously granted from a balance of moneys in their hands £10,000 to be used for the general purposes of the Infirmary—particularly emphasising the need for treatment of Discharged Soldiers and Sailors.

The net result of the year's finances shows a deficiency of £2,762 2s. 1d., a very small sum considering the rise in every direction of hospital upkeep in these difficult times.

The Board wish the Matron, Miss Vincent, and those under her to realise that they appreciate the great strain of keeping things right during the period of the war, and feel that the whole community is indebted to them.

The late Sir Edward Walter Green, Bart., whose estate was valued at £350,000, left his nurse, Miss Firth, £100.

The Scottish Women's Hospital at Belgrade is closing shortly, but we hear that there is plenty of work for trained nurses in Serbia. We have to thank a F.F.N.C. Sister now working there for some very interesting photographs.

Mrs. Strong, ex-President of the Scottish Nurses' Association, writes from the "Garden Tomb, Jerusalem":—"I am having a most interesting time, though primitive. It is wonderful what has been accomplished since our occupation—making of roads, planting trees, securing open spaces, &c., this outside the walls, of course. The city proper is a series of narrow lanes, every one apparently a market; much has been done in the way of cleansing. The Temple area is within the walls, which is difficult to realise. You come upon it suddenly from one of the narrow streets, and feel lost in its immensity. The Mosque of Omar, beautiful in itself, is rather a blot, out of place. Abraham's rock, which it surrounds, would be much more effective exposed.

"Where I am staying is supposed to be the Garden of Arimathea. Certainly the position,

outside the wall and near to Golgotha, lends itself to the idea. These journeyings will make a very pleasant ending to my busy life, and give me much food for reflection. I may go on to Ceylon for Christmas, returning home next summer. Warmest congratulations on what you and your earnest band of workers have accomplished."

Viscountess Astor, M.P., Sir Francis Champneys, and others, are appealing in the press for £8,000 to convert a suitable house into a Nursing Home for persons unable to pay the usual fees. The expenses are to be partially reduced by gratuitous nursing by members of a Church of England Sisterhood with proper nursing qualifications. We learn that a new Sisterhood is being inaugurated, which is to have trained nursing as its primary object—a Nursing Sisterhood, in fact. It is wonderful how we *revenons à nos moutons!* The Roman Church has had Nursing Sisterhoods for centuries—devoid of scientific teaching. Charity without Science is little use to the sick in these days. Hence the new departure. We presume the Sisters will all be "Registered Nurses," or their work will not inspire confidence.

The Professional Union of Trained Nurses are to hold a meeting at King George's Hall, Tottenham Court Road, on Saturday, April 24th, at 2.30 p.m., the first big meeting since it was registered as a trades-union.

At a meeting of nurses in training held in Melbourne recently, the following resolution was carried:—

"That in view of the long hours of service, the number of years of training, and the unsatisfactory conditions prevailing in the large public hospitals which nurses have to endure, this meeting resolves to take the necessary steps to have the Association of Nurses in Training registered under the provisions of the Federal Arbitration Act, in order that a plaint may be prepared for submission to the Court at an early date."

The Hon. Secretary, Sister A. F. Darling, was empowered to sign all documents essential for the purpose of the resolution.

It was also reported at the meeting that there was a movement on foot in New South Wales to bring the conditions of public hospital nursing into line with the reforms contemplated in the Victorian Nurses' Registration Bill.

New Zealand nurses who have had the benefit of State Registration since 1901 wish us all success now our long delayed Act is in force. They note with pleasure the reciprocity clause.

## SIR VICTOR HORSLEY.\*

## A STUDY OF HIS LIFE AND WORK.

The memoir of Sir Victor Horsley by Mr. Stephen Paget is a book which from cover to cover will be of absorbing interest to the members of the nursing profession, especially to the large group of nurses associated together in the Central Committee for the State Registration of Nurses, of which he was so prominent and distinguished a member. Mr. Paget is sincerely to be congratulated on the way in which he has compressed into one volume so complete a survey of a life so full and varied, and, at the same time, has conveyed an impression of the charm, the versatility, the modesty, courage, generosity and unselfishness which so endeared Sir Victor Horsley to those who knew him.

Difficult as it is to seize the heart out of this book, and present in a few columns the pith of matter already so highly condensed, the task must be attempted. The difficulty lies in the fact that the book presents to us a life with as many facets as a highly cut diamond. Thus we see Sir Victor as the man of science, of brilliant intellect, the operator of unsurpassed dexterity, of nobility of character, a modern crusader, ready to help to right any wrong, or to forward any movement for the good of the community, however adversely such advocacy might affect his personal interests. But though he had the brilliance, he had none of the hardness of the diamond. That he was—all honour to him—a keen fighter for the causes which he espoused all the world knows. Those most intimate with him know also that tenderness and sympathy, love of nature, love of little children, hatred of suffering and a passionate rebellion against all forms of injustice were component parts of his nature.

"It was part of the happiness of Victor Horsley's life," Mr. Paget relates, "that he was of good birth and had a family record to be proud of." His father was an artist, a Royal Academician, one of whose pictures was hung in the National Gallery; his mother, the daughter of a surgeon and the sister of a surgeon and artist—so it is not surprising that he, too, was touched with the divine fire.

## EARLY YEARS.

He was born in Kensington on the day Princess Beatrice was born; and Queen Victoria, who noted the coincidence, sent word that she wished him called after herself. The following year, his father bought a country house—"Willesley," near Cranbrook, in Kent—and here he and his brothers and sisters grew up. His letters "from his sixth to his eleventh year are short, objective, and abounding in happiness. They show a quick sense of the beauty of the world, but are neither sentimental nor imaginative. It is recorded of

him, at the age of six, that he asked his governess whether a chair in French "were still feminine if a man sat on it."

His early choice of a profession was that of a cavalry officer, but when told that his father could not afford this he said he would be a doctor, on condition that he should be a surgeon, not a physician, and his choice was justified by the result.

In January, 1874, he matriculated at the University of London, after being prepared for examination by Mr. (Sir Philip) Magnus. He is described by a fellow-pupil as a tall, manly youth, with a very delightful smile, with a strong sense of humour, and overflowing with the *joie de vivre*. He was always distinctly dogmatic in his views; if sarcastic at times, there was no venom introduced with the sarcasm. He was at home all the seven years of his time as a student, concerning which Mr. Paget writes: "He was kept at home too long; he ought to have had his freedom before 1880, before the influences of home and the influences of the hospital were in final conflict over him."

His younger sister, Mrs. Gotch (Rosamund) writes of this time: "No sooner did he really take up the study of medicine than everything gave place to it. He was a born enthusiast. He gave up everything that would interfere with his work, though to the last his boyish love of fun and games and of the country was as keen as when he was fourteen. He was always kind to me—his much younger sister—and delighted to teach me odds and ends of zoology and anatomy, for I had been interested in these subjects from the time of the early dissections at Willesley." These good comrades read together Clough's poems, Boyd Dawkins's "Early Man in Britain"; and, above all, Kingsley's "Yeast," "Two Years Ago" and "Health and Education." One wonders how much his passion for social reforms in later life, in connection with the health, housing and land of the people, may be traced to the seed then sown by a master hand, which fell on good ground.

Of his student days, the author writes: "He took his dominant place in 'the best set'—the strong-willed, hard-thinking young men who are the making of a great medical school, wherever they are. To him, now and always, everything was a matter of principle, and he defended his opinions so earnestly and so good-naturedly that where lesser men would have lost influence, he gained it. He did not stop at renouncing theatres and wine and tobacco. He hated loose talk and would not let it pass; and he obeyed all his life the rule of absolute chastity. He delighted to help men over their work. And in everything he had a way with him, a magic of his own."

## FIRST YEARS OF PRACTICE.

On November 18th, 1880, he wrote to his father: "I have managed the M.R.C.S. all right, although they adopted a bullying tone which shifts my centre of equilibrium, so that I am now qualified

\* Constable & Company, Ltd., Orange Street, London, W.C. 21S. net.

to practise." After a short holiday, he returned to University College Hospital as House-Surgeon to Mr. John Marshall, and thereafter passed from success to success.

During 1882-1884 he was Surgical Registrar to the Hospital, when his work included giving "informal teaching to the house-surgeons, students and nurses." In 1882 also he was appointed Assistant-Professor of Pathology. "He was most indefatigable in his work and a most pleasant man to have any dealings with." But it must have been a strenuous life, and it is pleasant to find it recorded that "one of ours" endeavoured to take care of him. "He invariably came to the Hospital between nine and ten o'clock at night, and dear old Lizzie Church, the head nurse of the ward, always made him a large basin of bread and milk before he left for home."

He and Mr. C. J. Bond paid a delightful visit to Italy, in 1882, after a strenuous and important year's work. We read of his keen imaginative enjoyment of Rome; and the horrid sight in a Rome hospital of maggots, dropped from wounds, on the floor of the ward.

November, 1882, saw him established in Gower Street with his friend—afterwards his brother-in-law—(Sir) Arthur Whitelegge. During his time there he wrote a slashing indictment "On the evil effects of Tobacco." It is, says Mr. Paget, unanswerable. But he is even more concerned with the ethical objections, so characteristic of his clean fastidiousness, "Why spoil the beautiful things on God's earth by creating such a horrible smell?"

#### ENGAGEMENT.

In October, 1883, he became engaged to Miss Eldred Bramwell, a daughter of Sir Frederick Bramwell. The engagement was a long one, for it was not until October, 1887, that they were married quietly at St. Margaret's, Westminster. We read, "On September 26th, Horsley writes from the Brown Institute to Semon, about their work together. 'I do so look forward to our resuming work in the winter when life will be a paradise, not the hell it has been.' He and Miss

Bramwell had been engaged for four years; he was sick of waiting. He used to say, in later life, that the four years had been a waste of time, not real life; that they had done nothing for him; that he had only been marking time."

#### FOUR YEARS OF STRENUOUS WORK.

Nevertheless, his professional work during this time was of the highest quality. The year 1884, when he was 27 years of age, was memorable for the beginning of his work with Professor Schäfer, and with Dr. C. E. Beevor, and also his appointment to the Brown Institution at Wandsworth.

#### THE CURE OF MYXŒDEMA.

It was in November, 1883, that the Clinical Society of London appointed a committee, of which Victor Horsley was a member, to inquire into the whole subject of the closely allied conditions of cretinism, myxœdema and cachexia strumipriva, and recognising "the hitherto undreamt-of importance of the thyroid gland, they asked Horsley to study it by the experimental method." This he did in Professor Schäfer's laboratory, and at the Brown Institution.

In December, 1884, he gave two lectures at the University of London, "The Thyroid Gland: its relation to the pathology of myxœdema and cretinism, to the question of the surgical treatment of goitre, and to the general nutrition of the body." Of this problem we are told "Horsley,

so far as this country is concerned, did more than any man to solve it."

But when the long expected Report of the Investigation Committee of the Clinical Society was published it contained not a word of hope of any cure of the disease. Finally, on February 8th, 1890 Horsley published in the *British Medical Journal* his "Note on a possible means of arresting the progress of myxœdema, cachexia strumipriva, and allied diseases," and advocated the transplantation of thyroid tissue into the patient. Later, other observers advocated feeding cases of myxœdema with fresh thyroid glands, or with taking thyroid extract by mouth. At the present time chemists are able to supply preparations of



VICTOR HORSLEY.  
Aged 11 years.



thyroid gland with which "men and women whose thyroids fail them can take care of themselves; they can treat themselves when they feel the need of it; they can free themselves from myxoedema to the end of their lives.

"The discovery came not from one line of study but from many. Horsley does not stand alone. But it was he who founded in this country the modern study of the thyroid gland; and it was he who first in this country suggested the rational method of treatment. Those of his profession who remember the years of ignorance, and the wonder and the delight of the new learning, are not likely to forget what he did in 1884-86 for science, and in 1890 for practice."

#### THE PREVENTION OF RABIES.

Equally brilliant was his work for the prevention of rabies (hydrophobia) which ended "when the disease, by the enforcement of muzzling, and by quarantine of dogs, was stamped out from the country. Up to that time he was Pasteur's chief representative and interpreter over here, He, more than anybody, explained Pasteur's method to the British public. It was a position of remarkable authority for him, and him so young, to be the one man in the Kingdom able to say, by the employment of Pasteur's test, whether a dog, killed on suspicion of rabies, had or had not been suffering from the disease. Nor did his work stop there; for he also saw many cases of the disease in man and animals, studied its incidence, examined and exposed a much advertised 'cure,' and fought in the Press, and on the platform, and by all ways of influence open to him, till there was nothing left to fight for."

Lady Horsley writes: "The real reason, of course, why Victor was so exceedingly keen about this question was because, having seen cases of hydrophobia, in private practice, the sufferings of the patients filled him with the most intense pity. I think I am right in saying that of all diseases he thought hydrophobia the most awful."

#### THE LOCALISATION OF FUNCTION IN THE BRAIN.

"It was natural," says Mr. Paget, "that Horsley should take the brain as his chief subject of study. The choice was decided for him; it was more compulsion than choice; it was thrust on him at lectures, and in talk and in reading, and by every 'head-case' in the hospital. All that was intellectual in him urged him to care more for the seat of the intellect than for any other organ in the body; it offered him problems and rewards that nothing else could offer; it was the kingdom intended for him, and he for it." Of his brilliant success in the difficult, practically unexplored realm of the surgery of the brain and spinal cord all the world knows.

(To be concluded.)

M. B.

An inmate of the Hospital for Incurables at Putney has died at the age of 97 years. She had been a beneficiary of the institution 56 years.

## SCOTTISH NURSES' ASSOCIATION.

The annual meeting of the Scottish Nurses' Association was held on Saturday, April 10th, in the Scottish Nurses' Club, 205, Bath Street, Glasgow. In the absence of the President, Mrs. Strong, Dr. McGregor Robertson presided, and after the Minutes were read and confirmed, the Chairman in opening the meeting mentioned the loss sustained by the death of Sir Robert Morant, K.C.B., and after paying a high personal tribute to the deceased, moved the following resolution, the audience meanwhile remaining standing:—

#### RESOLUTION.

By the untimely death of Sir Robert Morant, the First Secretary of the Ministry of Health for England and Wales, the Nation has lost a great public servant, who, after many years of devoted service to the State, sought to crown his life's work by the reorganisation of the Health Service of the Country.

The representatives of the Scottish Nurses' Association treasure ineffaceable memories of their interviews with him, of the swift intellect which probed their difficulties, the keen, yet friendly criticism of their arguments, the frank admission of fair pleas, the responsive sympathy with their ideals, the charm of his personality, and the abounding courtesy of his manner.

The Association records and seeks very respectfully to offer to Lady Morant the expression of their sympathy in her personal loss and to the Minister of Health their sense of the calamity to the State.

The report submitted by Miss Stewart, the Hon. Secretary, referred to the forming of the club, which had now a membership of over 700. The association was founded primarily for political objects—the statutory regulation of the training, examination, and registration of nurses—but the club had no political objects; it existed to provide nurses with something of the comforts and pleasures of a domestic life, and where they may discuss freely whatever opinions they may hold. Reference was made to the passing of the Nurses' Registration Act in December last, and to the help which the association could be to its members in regard to registration. The Chairman, in proposing the adoption of the report, which was approved, said that the first register under the Act ought to include every bona fide nurse in the country, and it would be the nurses' own fault if it were not so inclusive. The health services of the country were in course of reconstruction, and there were risks that to meet the exigencies of the time and the difficulties of the moment short cuts would be taken to secure without undue expense further help in that reconstruction. Their association would require to be exceedingly vigilant, not only in the interests of the nurses, but also for the welfare of the community. Dr. Robertson was appointed President; Miss Stewart, Hon. Secretary; Miss Cowie, Acting Secretary; and Mrs. Virtue, Hon. Treasurer; and to fill vacancies on the committee the meeting appointed Miss M'L. Walker, Miss Fraser, Miss Dow, Miss Downie and Miss N. Campbell. A. R. D. M. Cowan, M.P.,

addressed the meeting on the subject of "Some Possibilities under the Nurses' Registration (Scotland) Act," which, he said, was largely an enabling Act, providing opportunities and opening up possibilities for the Nursing Profession to secure proper conditions. It was beyond question that hitherto the nursing profession as a whole had been over-worked and inadequately remunerated. The time had come when matters should be put right. The operation of the Act would enable that to be done, but the nurses themselves must do it. Dr. John Patrick and Dr. A. K. Chalmers also spoke.

### IRISH NURSES' ASSOCIATION.

At a meeting of the Irish Nurses' Association, held at 34, St. Stephen's Green, Dublin, on April 10th, the new President, Miss Hezlett, R.R.C., presided. After the routine business an invitation was received from Mrs. Kenneth Stewart, of 52, Wimpole Street, London, to meet on April 18th Her Royal Highness Princess Christian at a Musical At-home. The members much regretted their inability to accept this kind invitation owing to the distance from London. The following were appointed to form the Finance Committee for the ensuing year:—Miss Carson-Rae, Miss O'Flynn, and Miss Haire.

### HEALTH WEEK.

MAY 2nd—8th, 1920.

The first week in May has been reserved for the celebration of Health Week, the immediate object of which is to focus public attention for one week in the year on matters of Health, and to arouse that sense of personal responsibility for Health, without which all public work, whether by the Government or Local Authorities, must fall far short of its aims.

It is proposed that the dominant idea for 1920 shall be "Self Help," and the consideration of what each individual can do for himself and his neighbour in securing a healthy life.

The movement was instituted in 1912 and in 1914 the Royal Sanitary Institute, 90, Buckingham Palace Road, S.W., appointed a committee to undertake its future organisation.

The King and Queen are the Patrons of this first post-war Health Week, and the Lord Mayor of London Chairman of the General Committee.

The ultimate objects to be kept in view are to secure the recognition of the fact that disease is a thing which can and should be prevented; to impart sound information as to public and personal hygiene, and to build up a public opinion which will not tolerate a high disease rate or excessive infant mortality, and which feels, as a personal reproach, the sight of an ill-nourished or neglected child.

The manner in which it is observed in each district is to be determined by a Local Committee, on which, amongst others, the medical profession and the nursing profession should be represented.

### THE "NURSE JULIET" SCANDAL.

The "Nurse Juliet" scandal in connection with the *Daily Telegraph* Shilling Fund "For our Nurses" received notice in the House of Commons on Tuesday, March 30th, in connection with the treatment of War Nurses.

#### CHARITY FOR NURSES.

Mr. Grundy (Labour, Rother Valley) asked the Secretary for War "whether his attention had been drawn to the public appeals being made, in connection with the Nation's Fund for Nurses, for charity for nurses who gave their services to the country during the War; whether the treatment of these nurses had been such as to render appeals for charity necessary; whether he knew or would ascertain the identity of the voluntary aid detachment nurse Juliet, referred to in the public appeal as a nurse who went through the War and who now suffered from bad eyesight and shattered nerves and was in precarious circumstances; and whether, in order to remove doubts, he could make a statement as to the treatment accorded to nurses who served during the War."

Sir A. Williamson (Financial Secretary to the War Office) replied: "Nurses temporarily employed by the War Office during the war have received pay and allowances on appropriate scales, and have been treated in case of disability on the same lines as members of the Queen Alexandra's Imperial Military Nursing Service. The War Office is not responsible for nurses employed by the British Red Cross Society or other organisations. If the nurse to whom the honourable Member refers was employed by the War Office, and he is not satisfied that she has received proper treatment perhaps he will let me have further particulars."

Mr. Grundy has done public service in directing attention to this subject, and we hope he will not desist from his inquiries until it is probed to the bottom. It will be noticed that Mr. Grundy's question, addressed to the Secretary for War, was directed to two points: (1) Whether the treatment of nurses who gave their services to their country during the war had been such as to render appeals for charity on their behalf necessary; and (2) whether he knew, or would ascertain, the identity of "Nurse Juliet."

Sir Archibald Williamson did not give a direct reply to either question; the inference from his reply to question No. 1 is that nurses temporarily employed by the War Office are appropriately provided for in case of disability, in which case there is obviously no necessity for an appeal for charity upon their behalf day after day in the public press, not only to the public but primarily to "the men in the Navy and Army who know best what these fine women did in the war, the men who were the direct recipients of the devoted service which these women so readily gave."

If the fact is that provision is made, as it should be, by the State for nurses disabled in the war,

then it is a cruel and inexcusable thing to trade on the gratitude felt by sick and wounded men for those who nursed them, by pretending that they are in such dire straits as to appeal for, and accept with thankfulness, the shillings which these men can ill afford.

Sir Archibald Williamson made no statement as to the identity of "Nurse Juliet," but endeavoured to repudiate responsibility for her alleged destitution by stating that "the War Office is not responsible for nurses employed by the British Red Cross Society, or other organisations." We believe that on the outbreak of war the Voluntary Aid Detachments of the British Red Cross Society came under the authority of the War Office as an integral part of its organisation, and, in any case, the War Office, which is responsible for the efficient care of the sick and wounded, cannot justly repudiate responsibility for those who have been broken in its service. But, even so, if, as the *Daily Telegraph* alleges, "Nurse Juliet" "is typical of many thousands of cases, and that very large numbers of women who unhesitatingly gave their all when war broke out are now in actual want and in real distress of mind," what is the British Red Cross Society doing that it permits this want and distress, while it scatters largesse around, and, for example, presents one V.A.D. with £900 in order to obtain a medical education?

But who is "Nurse Juliet"? We have publicly challenged Lord Burnham and the editor of the *Daily Telegraph* to give a straight reply to our straight questions:—

1. Is "Nurse Juliet" a real or fictitious personality?

2. Has the money subscribed to the Shilling Fund for Nurses as the direct result of the harrowing appeal in "Nurse Juliet's" name been extracted from the public by a mythical story—or has it not?

3. Has the *Daily Telegraph* descended to fiction because its appeal cannot be justified by fact?

No answer has been forthcoming to these questions publicly asked in our issue of February 21st. We now suggest that they are unanswered because they are unanswerable, except with the reply that there is no such person as "Nurse Juliet," and that the public have been duped to give their money because of the supposed want and distress of a fake.

But other enquiries have been made as to the identity of "Nurse Juliet" by the Hon. Secretary of the Society for the State Registration of Trained Nurses, as related below:—

#### CORRESPONDENCE.

431, Oxford Street, London, W. 1.

March 15th, 1920.

To the Right Hon. Winston S. Churchill, M.P.,  
Secretary of State for War and Air.

SIR,—I am directed by the Executive Committee of the Society for the State Registration of Trained Nurses to draw your attention to the case

of "Nurse Juliet" as detailed in the *Daily Telegraph* of February 6th, and to ask you whether the War Office will investigate the case, and if the facts, as alleged, are verified it will take steps to relieve the necessities of this woman, which, as related, appear so distressing as to attract hundreds of shillings to the *Daily Telegraph* Shilling Fund for Nurses?

Moreover, that paper asserts that "Nurse Juliet" "is typical of many thousands of cases." It appears to my Committee incredible that thousands of women who in the time of their country's need have "spent youth and health and the joy of life in ministering to its stricken sons" should be reduced to the pitiable condition of ill-health and penury in which "Nurse Juliet" is portrayed, but, if so, they venture to hope that provision may be made by the State for the relief of their necessities.

(Signed) MARGARET BREAY,  
Hon. Secretary.

[The cutting from the *Daily Telegraph* containing the case of Nurse Juliet was enclosed with the above letter. A copy of the letter and cutting were also sent to Sir Reginald H. Brade, G.C.B., Secretary of the War Office.]

REPLY.

War Office, S.W. 1.

March 20th, 1920.

MADAM,—I am commanded by the Army Council to acknowledge the receipt of your letter of the 15th inst., which is receiving attention.

(Signed) H. J. CREEDY.

431, Oxford Street, W.

March 16th, 1920.

To the Chairman of the Nursing Board, Queen Alexandra's Imperial Military Nursing Service.

SIR,—I am instructed by the Executive Committee of the Society for the State Registration of Trained Nurses to direct the attention of the Nursing Board of Queen Alexandra's Imperial Military Nursing Service to the Appeal appearing daily in the *Daily Telegraph*, with the object of raising a "Shilling Fund" "for our nurses," the indigent War Nurse being put prominently forward as the *raison d'être* of an appeal directed to "every soldier, every sailor, everyone who served his country in an auxiliary force, as in the women's uniformed services," and to enter a serious protest against the depreciation of the professional and economic status of nurses by an appeal to the rank and file of the Army to relieve the necessities of members of the nursing services, and of other nurses who are in necessitous circumstances owing to the services they have rendered to the sick and wounded.

I enclose a cutting relating to "Nurse Juliet" who is described as a "Nursing Sister." My committee is of opinion that if the facts are as alleged, the State, not the rank and file of the Army, should be responsible for relieving the

necessities of "Nurse Juliet," and of the "many thousands of cases" of which she is said to be typical.

It hopes that the Nursing Board of Queen Alexandra's Imperial Military Nursing Service will draw the attention of the Secretary of State for War to the "very large numbers of women who unhesitatingly gave their all when war broke out, and are now," according to the *Daily Telegraph*, "in actual want and in real distress of mind."

(Signed) MARGARET BREAY.  
Hon. Secretary.

REPLY.

War Office, S.E.1.  
March 25th, 1920.

A.M.D. 4.

MADAM,—I am directed to acknowledge your letter of the 18th instant, and to inform you that the Nursing Board of the Queen Alexandra's Imperial Military Nursing Service have no knowledge of the lady referred to in the above quoted letter.

(Signed) A. B. SMITH,  
Matron-in-Chief, Q.A.I.M.N.S.,  
for Director-General Army Medical Service.

431, Oxford Street, W.  
March 26th, 1920.

To DAME S. A. SWIFT, R.R.C.,  
Matron-in-Chief Joint War Committee.

DEAR MADAM,—I am directed by the Executive Committee of the Society for the State Registration of Trained Nurses to ask you to furnish the Committee with the surname of "Nurse Juliet" whose destitute condition was detailed in the *Daily Telegraph* of February 6th, and the date when she was sent to France. Before being permitted to proceed there she must have obtained the Anglo-French certificate issued under the authority of the Joint War Committee, and must therefore be known to its officials. As public money has been subscribed as a result of the statement regarding her destitution in the *Daily Telegraph*, my committee consider that they have a right to be informed of her name, and when she proceeded abroad.

(Signed) MARGARET BREAY.  
Hon. Secretary.

REPLY.

Joint War Committee, British Red Cross Society, and the Order of St. John of Jerusalem, Trained Nurses' Department.

19, Berkeley Street,  
London, S.W.1.

DEAR MADAM,—In answer to your letter of enquiry re Nurse Juliet, whose name you say was mentioned in the *Daily Telegraph*, I have no authority for giving you the information you desire.

(Signed) S. A. SWIFT.

This letter indicates that Dame Swift is in possession of the information asked for.

The honour and humanity of the Nursing Department of the War Office, or of the Joint War Committee of the British Red Cross and the Order of St. John, have been seriously impugned by the *Daily Telegraph*. One or the other did or did not send an untrained mannequin to the front to nurse our sick and wounded soldiers in the War, and then left her with broken health to starve.

The War Office and its Nursing Department repudiate any knowledge of "Nurse Juliet."

It remains therefore for Dame Swift, R.R.C., D.B.E.—the Matron-in-Chief of the Joint War Committee—who was responsible for the selection of V.A.D. nurses sent abroad, to exonerate the Joint War Committee or the *Daily Telegraph* from grave suspicion of deluding the public.

If the "Nurse Juliet" story is true, then the Joint War Committee and its officials are to blame. If the Nurse Juliet story is a fake, then the *Daily Telegraph* should be very severely dealt with by some responsible authority for taking money from the public by an untruthful appeal, and the Joint War Committee should be the first to urge this course.

We hope, therefore, for the protection of the public, Mr. Grundy will continue to press in Parliament for the truth concerning this matter.

Mixed up with the "Nurse Juliet" scandal is the very unsatisfactory manner in which that registered war charity, the Nation's Fund for Nurses is being handled. The continued denial to the Press and the public of any audited balance sheet and statement of accounts since its inception in 1917, is in our opinion a gross violation of the avowed intention of the War Charities Act. Why should persons in high places be permitted to flout the Law?

### PHILANTHROPIC EMPLOYERS.

Miss Helen G. Klaassen writing recently to the *Daily News* says:—

"You quote the organising secretary of the College of Nursing as saying, 'The hospitals, as a whole, are willing to improve conditions and wages, but they are dependent on the support they receive from the public.'"

"Not only hospitals, but other philanthropic bodies take the line that difficulty in raising money is a reason for sweating employees. They are helped in this by persons of private means, who accept salaries they could not live on. District Nursing Associations have still further wronged their employees by accepting very low payments from public authorities for the services of the visiting nurse."

"There must be a drastic reform if administrators wish to continue their work and not hand it over to the State and municipality. Some persons would feel more inclined to subscribe if good finance, good conditions of employment and sound facts about the matters they deal with were put before them."

## APPOINTMENTS.

### MATRON.

**Cottage Hospital, Market Harborough.**—Miss Maud L. Bond has been appointed Matron. She was trained at the Bethnal Green Infirmary, and has been Matron of the Cottage Hospital, Fleet, Hants; Sister at St. Monica's Hospital, Brondesbury Park; Matron of the Launceston Infirmary; and a Superintendent Nurse at Bethnal Green Infirmary.

### ASSISTANT MATRON.

**St. Bartholomew's Hospital, London, E.C.**—Miss Helen T. Baines has been appointed Assistant Matron. She was trained for one year at the Hospital for Sick Children, Great Ormond Street, W.C., and in general nursing at St. Bartholomew's Hospital, where she was gold medallist of her year (October, 1912). Since October, 1913, she has held the position, first, of Assistant Office Sister, and then for the past five and a-half years of Matron's Office Sister.

**District Asylum, Ayr.**—Miss Elizabeth C. Kerrigan has been appointed Assistant Matron. She was trained at the Edinburgh Royal Asylum, and has been Assistant Matron at the Stirling District Asylum, Larbert; Matron of the Merkur Hospital, Serbia; and Sister at Townley's Hospital, Bolton, and at Seafeld Hospital, Leeds.

**Hayes Certified School, Hayes, Middlesex.**—Miss Adah A. Patten has been appointed Assistant Matron. She was trained for two-and-a-half years at Middlesex Hospital; and has been Charge Nurse at the Borough Hospital, White Bushes, Earlswood; at the Borough Sanatorium, Folkestone; and at the Borough Hospital, Hyde, Cheshire.

### SISTER.

**General Hospital, Bridgwater.**—Miss E. A. Baines has been appointed Sister. She was trained at Lewisham Infirmary; and has been Sister at the Kendray Hospital, Barnsley, and at the Royal Hospital for Incurables, Putney. She has worked as a member of Queen Alexandra's Imperial Military Nursing Service Reserve, at home and abroad, and has also had experience of private nursing.

## PRESENTATION.

Nurse Bayne, who for the past twelve years has been the district nurse of the Sudbury and Ballingdon Nursing Association, is leaving Sudbury for Scotland and she was recently presented with a note-case containing the sum of £22 11s., as a small token of esteem and gratitude from those who appreciated the good work she had carried on in the borough. The presentation was made by Dr. J. Sinclair Holden, the chairman of the Nursing Association Committee, at his residence, East House. At the last meeting of Sudbury Infants' Welfare Centre at the Technical Institute, Mrs. Richardson, on behalf of the mothers, presented Nurse Bayne with a silk umbrella, mounted with silver, from the mothers of the Centre, where she had given valuable assistance for the last three or four years.

## WEDDING BELLS.

On April 7th, at St. Margaret's Church, Westminster, the marriage took place between Sir Evelyn Campbell Ellis, Kt., and Katherine Rose, widow of W. H. P. Jenkins, Esq., late of Frenchay Park, Bristol. Before her first marriage Lady Ellis, *née* Abernethy, was trained at St. Bartholomew's Hospital, where she held for a time the position of Matron's Office Sister, and met her first husband when working on the Private Nursing Staff.

Sir Evelyn Campbell Ellis is a solicitor, and has held important official positions in the Straits Settlements.

After the wedding, a very largely attended reception was held at the Hyde Park Hotel, at which many "Bart's" friends were present.

## THE PASSING BELL.

We regret to record the death, on Easter Eve, from apoplexy, of Miss Rose Wilson, Matron of the East Ham Isolation Hospital. Miss Wilson, who had been in the service of the authority for twenty years, had gone to her room to get ready to go to church, and was found in an unconscious condition. Medical aid was at once summoned, but she passed away without recovering consciousness.

We regret to record the death of Miss Eliza Passant, for many years a member of the nursing staff of St. John's House, of Norfolk Street, Strand, and Queen Square, Bloomsbury. She was trained at King's College Hospital, and was a member of the League of St. John's House Nurses.

The sad death of Nurse Ada Spreadbury, who was engaged in Infant Welfare Work at Byfleet, was the subject of an inquest at Woking last week, where a verdict of "suicide while of unsound mind" was returned. Three empty chlorodyne bottles were found in her bedroom. The evidence showed that the nurse lived a very quiet life and gave every satisfaction in her work, but was under delusions that her relatives and friends and others were against her. Dr. Jones, County Medical Officer of Health, said that he had come to the conclusion Nurse Spreadbury was suffering from delusions and incipient insanity, and he had explained the state of affairs to a relative. The nurse was alive when the police entered her flat, to which attention had been directed by her moans, but died early the next morning without regaining consciousness, from narcotic poisoning. When found she was carefully dressed in a new nightdress and clean sheets had been put on the bed. We offer our sincere sympathy to the relatives of this poor nurse on her tragic end.

## TO NURSES WHO KNIT.

The work arising out of the War has brought about a revival of the art of knitting and nurses particularly seem to find that considerable fascination lies in it. It provides a pleasant occupation during the long hours of night duty when the patient is often sleeping soundly but the nurse must not.

We have heard many discussions lately as to the various styles for making jumpers and several nurses have made exceedingly pretty ones, sometimes to wear with an ordinary skirt and sometimes under a uniform coat which is not quite thick enough for very cold weather.

Any nurse who contemplates making a jumper should not fail to pay a visit to Messrs. Cozens of 32, Edgware Road, where she will find an immense variety of beautifully coloured wool and silk at prices lower than any we have yet seen. It must be a real pleasure to work with such lovely shades and, as one nurse pointed out, a jumper knitted in pretty material can be used on so many occasions it "wears for ever" and is not nearly so costly in the long run as a blouse, which requires constant washing.

## THE HOSPITAL WORLD.

The Secretary of the London Foundling Hospital says the financial position is such that unless they get the assistance of the public they will have to consider selling their art treasures or the site of the hospital. We do very sincerely hope the "art treasures" whatever they are, will not be sacrificed. We once visited a hospital in Dublin where we sat in a Queen Anne chair, one of a set, well worth a masked raid, and a motor-car for their removal! Other hospitals also possess "heirlooms" which should be carefully scheduled in these days against any risk of removal.

Mr. Roger Beck, Chairman of the Swansea Harbour Trust, has purchased Parc Wern Mansion, at Swansea, at a cost of £16,000, and presented it to the local Hospital Board.

A United Kingdom Conference on the Prevention of Diseases of the Teeth will be opened at Manchester on May 13th. Programme, with full particulars, may be obtained by sending 1½d. stamp to the Food Education Society, Danes Inn House, 256, Strand, W.C.2.

## MILK AND MILK PRODUCTS.

A course of lectures on Milk and Milk Products will be delivered by Mr. Cecil Revis at the South-Western Polytechnic, Manresa Road, Chelsea, S.W. 3, beginning on Thursday, April 29th, 1920, at 7 p.m. The syllabus includes, "The Chief Properties of Milk," "The Sources of Bacteria in Milk," "Pasteurisation," and "The Properties of Milk Products." Those wishing for further information should apply to the Secretary of the Institute, Room 83. The Course is specially designed for nurses, sanitary and food inspectors, to whom expert knowledge on this important subject cannot but be of extreme value.

## COMING EVENTS.

*April 16th.*—Society for the State Registration of Trained Nurses. Meeting of Executive Committee, 431, Oxford Street, London W. 4 p.m.

*April 24th.*—Central Committee for the State Registration of Nurses. Meeting, Council Chamber, by kind permission of the British Medical Association, 429, Strand, W.C. 2.30 p.m.

*April 24th.*—Professional Union of Trained Nurses. A meeting will be held at King George's Hall (London Central Y.M.C.A.), Tottenham Court Road. 2.30 p.m.

## A WORD FOR THE WEEK.

"I believe in getting as much good outen life as you kin—not that I ever set out to look fer happiness; seems like the folks tha does, never finds it. I jes' do the best I kin where the good Lord put me at, an' it looks like I got a happy feeling in me 'most all the time."—*Mrs. Wiggs of the Cabbage Patch.*

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.*

## CONGRATULATIONS FROM VICTORIA.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Heartiest and sincere congratulations upon the passing of your Nursing Acts. Your hard consistent work has been at last rewarded. May God give you the strength to help with the reconstruction of the profession, to my mind this is a task that will need all the organising skill and care of the pioneer. Others will naturally think they are quite competent for such work, with this I don't agree. You have toiled along the road of obstacles, and know the dangers and pitfalls more than any other living nurse. Would that Florence Nightingale had lived to see the profession she worked so hard to raise recognised by an English Parliament. Truly out of the dreadful war has arisen one good—the giving to women their own place and power in the Nation.

I am, sincerely yours,

GRETta LYONS.

President Royal Victorian Trained Nurses' Association.

Melbourne.

## TO MEMBERS AND ASSOCIATES OF THE BETHNAL GREEN INFIRMARY NURSES' LEAGUE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I shall be most grateful if you will help me, through your valuable columns, to get into touch with nurses trained in the Bethnal Green Infirmary, some of whom I have lost sight of during the war as it was then impossible to keep up our League Meetings and Magazine.

I should like them to send their present addresses and a short account of their work since finishing their training, and I should be glad to see any former Member or Associate of the Bethnal Green Infirmary Nurses' League at a re-union meeting to be held at the Infirmary on June 1st from 3 p.m. to 10 p.m.

It will be exceedingly kind if you will let them know this.

Yours faithfully,

ELIZABETH DODDS,

Matron.

Bethnal Green Infirmary,  
Cambridge Road, Bethnal Green,  
London, E. 2.

## "NEVER RESIGN" (BEACONSFIELD).

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—In the recently issued Report of the Nurses' Co-operation, Langham Street. I see my name placed among the resignations.



I beg to state that I have *not* resigned from the staff of the Nurses' Co-operation. If you will be so good as to give this fact publicity in your Journal, I shall feel grateful.

Yours faithfully,

MARY HILLIARD.

## KERNELS FROM CORRESPONDENCE.

### SHOULD PRIVATE NURSES BE INCLUDED IN THE HOURS OF EMPLOYMENT BILL?

We have again received a large number of post-cards from private nurses objecting to inclusion in the Hours of Employment Bill, to be considered by Parliament at an early date, and one approving of inclusion.

*Miss C. T. Everest, Ryde*, writes:—"I should very strongly urge that nurses in private should be included in the eight hour per day system. Why should we not have something besides our work to live for? In my opinion the result would be healthier nurses, better work, longer life. Where is the advantage to slave for a few years, to save a few pounds, and die at an early age, before the harvest is half reaped?"

(The majority of nurses in private practice, who are sensible women, come to terms, more or less satisfactory to both parties, with their private patients, and continue in the work for many years, without apparent injury to health. Nurses should take a stand against any form of "slavery," and decline to serve people who would enforce it.—ED.)

Many nurses write to agree with the opinions expressed by their colleagues last week.

*Mrs. Balstone, President Victoria and Bournemouth Nurses' League*:—"With reference to the paragraph in THE BRITISH JOURNAL OF NURSING of April 3rd, regarding the hours of employment for Private Nurses, I beg to state that I am decidedly against an eight-hour day for private nurses for the following reasons:—

"(a) In acute cases the fewer changes the better. I may be old-fashioned, but I consider that for the first week after an operation, or at least until the crisis is well passed, no good nurse would wish to do less than a twelve-hour day.

"(b) An eight-hour day would press very hard on middle-class people with fixed incomes—a class which is already very hard hit. Only the rich could afford to employ private nurses who work an eight-hour day.

"(c) Although an eight-hour day is practicable in hospital, where many nurses are available and on the spot, it is not practicable in private nursing."

*Miss H. E. Sadlier, London*:—"I shall do all I can that is best for the patient before I study any unions or bills."

*Miss H. E. Smith, Warrington*:—"I have been a nurse forty-four years. I am opposed to only eight hours daily, as I could not attend to my patient as I should wish to."

*Miss Maud Tucker, Hareston*:—"I have been

a private nurse twenty-eight years, and am quite sure that eight hours is quite impracticable for a private nurse. My patients, with two exceptions, have made up to me for loss of rest when they got better."

*Miss F. Sheppard, Tunbridge Wells*:—"I do not approve of the eight-hours' system; it would upset the patient, and the nurse could not take very much interest in the patient, being on duty so short a time."

*Miss E. Horton, Glasgow*:—"I consider an eight-hour day for private nurses would be unworkable. It would be unsatisfactory to patient and employer, and would result in loss of many a serious case, unless three nurses were in attendance. Briefly put, it would not be nursing. A nurse having had the benefit of an eight-hour day during training, would not enter the sphere of private work with her system undermined, and her energy flagging. Having had the chance of broadening her mind and enlarging her sympathies, she ought to be more likely to benefit all concerned than under the present system."

(We find nurses are strongly in favour of an eight-hour day in the wards during training, when the theory of their profession has also to be studied. When in the future they have to study for their State Examination, it will not be possible to do more than eight hours practical training daily in the ward. We claim that nurses in administrative positions and in private practice, should not be legally restricted to eight hours' work daily, as it would interfere with the efficient performance of their duties.—ED.)

*Miss M. Trevor, Cardiff*:—"Competition is quite keen enough already between the trained and untrained private nurse; unless we want to be eliminated from this branch of work altogether, we must oppose any such folly. I have written my M.P. as you recommend."

*Miss Mary Farmer, Manchester*:—"Half a loaf is better than no bread, and, of course, an attendant who can wait on a sick person under doctor's directions would be of more use than the most highly skilled nurse who was prevented by law from doing so. The whole suggestion appears to me suicidal for private nurses."

Several nurses notify that they have written to their M.P.'s on this question. We hope many have done so who have not notified us.

## OUR PRIZE COMPETITIONS.

### QUESTIONS.

*April 17th*.—How would you recognise perforation in a case of enteric fever? What immediate action would you take, and how could you temporarily relieve the patient?

*April 24th*.—What is meant by (a) cross infection, and (b) concurrent double infection? How may cross infection arise? What measures are adopted in hospital for its prevention? Give some examples of concurrent double infection.

# The Midwife.

## QUEEN CHARLOTTE'S HOSPITAL.

### SERIOUS FINANCIAL POSITION.

The Annual Meeting of the Committee of Management of Queen Charlotte's Hospital took place in the Board Room of the hospital on the 29th ult, the Chairman, Major Sir Samuel Scott, Bart., presiding.

He said that the number of patients showed a considerable increase during the past year. This increase he attributed chiefly to the lack of housing accommodation, a number of the applicants who sought the hospital benefit would ordinarily have been quite well off in their own homes. There had also been an increase in abnormal and serious emergency cases, which had been sent from all quarters, both in London and in the country, and many were in a moribund condition on admission. As a result, the death rate had been higher, and there had been in all twenty maternal deaths. Up to the present time the wives of soldiers and sailors had been treated, both as in and out-patients, free of cost, and without the usual letters. The Committee regretted that they had come to the conclusion that for financial reasons, this practice must now cease.

The overcrowding of the wards was causing the authorities great anxiety. The accommodation of the hospital provided for 71 beds, and extra emergency cases had at times brought up the number to 80. It was not possible to send on these cases elsewhere, as they always arrived at the last minute. A certain number of cases had been sent on to the St. Pancras and the Marylebone Infirmarys. The subscribers who sent patients with letters objected strongly to this procedure.

The overcrowding could only be dealt with by enlarging the hospital. The scheme for this work before the war was estimated at from £9,000 to £10,000 pounds, the same work would now cost £50,000. At present there was not the money to carry it out.

Many improvements ought to be effected in the wards, and the electrical department should be brought up-to-date. In fact the hospital suffered from old age.

Expenditure continued to rise on all sides. Every effort was made to keep it down, but it was found to be impossible.

It was estimated that to bring the hospital up-to-date, the sum of from £80,000 to £100,000 pounds was required, in addition to the deficit already existing of £11,000.

Queen Charlotte's Hospital was not alone in this condition of affairs. He could not think complacently of the future of hospitals. A Government grant must be given. In the past they had been supported by private individuals,

and the largest subscribers had been those who were hardest hit by the war. He did not see how it was possible for them to continue on the voluntary basis.

The position of the Training School was satisfactory. The entrances were larger than those of previous years. At present there was a long waiting list which was very satisfactory, and showed the high repute in which it stood.

After the usual votes of thanks, duly seconded and proposed, the meeting terminated.

### POST GRADUATE COURSE FOR MIDWIVES.

The eighth annual Post Graduate Course will be held at the General Lying-in Hospital, York Road, Lambeth, from June 21st to June 25th, inclusive. Lectures and clinics will be held.

Full particulars and programme can be obtained from the Hon. Secretary for the Post Graduate week. Further announcements will be made later. Fee for the course 6s.

### INFANT'S DEATH FROM INSECT'S STING.

An infant, six weeks old, in the Strood (Kent) Infirmary, died in convulsions thirty hours after being stung on the left cheek by an unknown insect.

The nurse in charge of the ward told the Coroner at the subsequent inquest that she caught the insect, which had bronzed variegated wings, and threw it out of the window, and did not notice till afterwards that the child had been stung. This was unfortunate, as presumably the first thing she would have done, as a trained nurse, had she realised the baby had been stung, would have been carefully to preserve the insect which inflicted the wound for medical inspection.

The Coroner, who said that he had never met with a similar case, suggested that the insect might have been imported from abroad in a bale of goods.

### BILL TO AMEND THE BASTARDY LAWS.

All nurses and midwives should acquaint themselves with the provisions of the Bill introduced into the House of Commons by Mr. Neville Chamberlain to amend the Bastardy Laws. The Bill proposes to legitimise children whose parents have afterwards married, it requires the mother to divulge the paternity of the child when registering it, and makes the maximum order for maintenance which may be made against the father 40s., instead of 5s. Every illegitimate child is to be a ward of the local Juvenile Court.

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
**THE NURSING RECORD**  
EDITED BY MRS BEDFORD FENWICK

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## EDITORIAL.

### A FAMILY OF NATIONS.

It is of the highest significance that the signatory Powers to the League of Nations Covenant should have recognised that interest in matters affecting the health and welfare of their peoples is of vital importance; and that Dr. Addison, as Minister in the first country to establish a Ministry of Health, should have been asked by the Council of the League to summon a Conference and prepare proposals for the establishment of an International Health Organisation.

This is the conference which took place last week at the Ministry of Health, in connection with which the Minister of Health presided at a luncheon at the Carlton Hotel given by the Government to meet the delegates to the International Health Conference. Lord Astor was chairman of the conference, which was attended by Delegates from France, Italy, Japan, the United States, and Great Britain, and the League of International Red Cross Societies, the International Labour Bureau, and the Office International d'Hygiene Publique were represented.

The outcome of the Conference was that it was decided to submit to the Council of the League of Nations a proposal to form a permanent International Health Council, concerning which the Minister of Health expressed the opinion that it would be one of its most important branches.

One of the results of the recent war has been to prove to the countries affiliated in the League of Nations that they are all inter-dependent, and that what affects one is of vital moment to the others. Thus the International Health Conference last week conferred and co-operated in advising on such measures as are possible to combat typhus in Poland, and thus prevent its spread throughout Europe. In considering this question the Conference had

the advantage of the presence of the Polish Vice-Minister of Health, Dr. Chedzke, and of his medical expert, Dr. Rajehmann, a practical proof of the value of international co-operation. Another pleasant feature of the conference was the opinion voiced by M. Brisac, the senior French delegate, when he said that the barriers which had separated the countries had now been broken down, and that when the French delegates came to this country they felt that they were amongst their own family.

In connection with the international organisation of health workers it is interesting to remember that the first to organise on international lines were the trained nurses, who, just twenty years ago, on the initiative of the Editor of this Journal, founded the International Council of Nurses, which adopted the following Preamble to its Constitution :—

"We nurses of all nations, sincerely believing that the best good of our Profession will be advanced by greater unity of thought, sympathy, and purpose, do hereby band ourselves in a confederation of workers to further the efficient care of the sick, and to secure the honour and the interest of the Nursing Profession."

The objects of the Council were thus defined :—

(a) "To provide a means of communication between the nurses of all nations, and to afford facilities for the interchange of international hospitality.

(b) "To provide opportunities for nurses to meet together from all parts of the world, to confer upon questions relating to the welfare of their Patients and their Profession."

Such opportunities were provided in Buffalo (1901), Berlin (1904), Paris (1907), London (1909), and Cologne (1912), when representative nurses from twenty-three countries were present, and the transactions of these conferences show the value of their deliberations.

## OUR PRIZE COMPETITION.

**HOW WOULD YOU RECOGNISE PERFORATION IN A CASE OF ENTERIC FEVER? WHAT IMMEDIATE ACTION WOULD YOU TAKE, AND HOW COULD YOU TEMPORARILY RELIEVE THE PATIENT?**

We have pleasure in awarding the prize this week to Miss A. M. Douglas, University College Hospital, Gower Street, W. 1.

### PRIZE PAPER.

Perforation may occur during even a slight case of enteric, usually in the third or fourth week. The ulcers in this fever are chiefly situated in the lower part of the ilium, during the third week the sloughs come away, and the ulcer either heals slowly by granulation or perforation occurs. The contents of the intestine then find their way into the peritoneal cavity, and peritonitis quickly sets in.

When perforation occurs, the nurse will notice a quick change in the patient's condition. He may suddenly complain of severe abdominal pain, and the abdomen rapidly becomes distended. The breathing becomes more rapid and shallow owing to the muscles of the chest only being used. The temperature rises, and the pulse rate increases in beat, and is hard and wiry. The face wears an anxious expression, and though he does not move himself about owing to the extreme tenderness of the abdomen, the patient is restless.

The usual symptoms of high fever are present—scanty urine, dirty tongue and throat. Owing to the contents of the bowel being able to pass into the peritoneal cavity there is constipation.

When the physician examines the abdomen he will procure the tympanitis note, and there may be dullness over the spleen and liver.

Unless an operation is performed within twenty-four hours, to suture the perforation, there is really no chance of the patient's recovery. Even when operated on, the patient may not live, owing to the great shock, but at least he has the best chance of life. The sooner the operation be performed, the more favourable the prognosis. No nurse should undertake the nursing of a typhoid case in a private home without having considered the possibility of having to prepare at a few hours' (or less) notice for a surgical operation.

If an operation is not performed, the symptoms of peritonitis continue, and death may take place within from twenty-four hours to five days.

The pain subsides. There is more distention of the abdomen. Hiccough may be troublesome. Fæcal vomiting takes place. The temperature falls, the skin becomes clammy, and death takes place from collapse. The patient is quite unconscious up to the end as a rule.

The first duty of the nurse is to send concise particulars to the doctor and to see that they are sent by the quickest method, and that his directions are delivered to her as soon as possible. In the meantime she must reassure her patient, and make him as comfortable as possible. He may lie on his back, and a pillow should be placed under the knees. A hypodermic syringe should be prepared containing morphia, but this cannot be given until directions to do so have been obtained. Preparation must then be made for an operation.

The nurse must procure (1) a suitable table (length six feet by three feet) on which is placed a mackintosh and a sheet; (2) boiling water and cold boiled water in the utensils they were boiled in—these must have lids; (3) clean towels and basins. These should be, if possible, placed in a room next to the patient's, from which all furniture that can be, and hangings, have been removed. Two small tables should be covered with clean towels wrung out in disinfectant. These are for the instruments and for the anaesthetist's requisites. The table should be placed with one end about six feet from the window admitting the most light. The instrument table is placed on the left of this, and the anaesthetist's table at the head on the right. An enamel basin which has been boiled should be within reach of the surgeon, should he require to rinse his hands during the operation.

The nurse must see that there are stimulants at hand, that she has plenty of hot bottles, and a means of raising the foot of the bed, as when the patient is put back he will be suffering from severe shock. The patient lies flat till he recovers consciousness, and is then nursed in the Fowler's position.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Bowen, Miss M. Cullen, Miss Nellie Wood, Miss P. Thompson, Miss J. James, Miss Margaret A. Young.

### QUESTION FOR NEXT WEEK.

What is meant by (a) cross infection, and (b) concurrent double infection? How may cross infection arise? What measures are adopted in hospital for its prevention? Give some examples of concurrent double infection.

## NURSING ECHOES.

The matron (Miss Fitch) of the Alexandra Hospital, Queen Square, Bloomsbury, London, W.C., who is endeavouring to raise £1,000 for the nurses' branch of the building fund of the hospital, issued invitations for an American tea on Saturday, April 17th, to which many friends responded. Every one was asked to bring one article priced for sale, and to buy one article. The attractions included a cake-weighing competition, some delightful music, and tea was served at 6d. a head. The wards were open to inspection, and the little patients, many of whom have been in the hospital for a long

But it was because no one had taken the trouble to remove the now most mournfully dead wreaths that were placed against the monument some weeks ago. There they still were, a hideous rain-soddened litter of rust-red rot, undoing the bright faces of the people who streamed down from the Coliseum for their trains and 'buses for the South-Western suburbs, and putting back into their eyes the sad and weary look they had recently paid to get rid of! Has the care of this monument so soon become nobody's business?

Perhaps an even more hideous note of gloom around the Cavell monument was that sounded by the frightening hoarse voices of the



THE GRAVE OF EDITH CAVELL AT NORWICH.

time, appeared as happy and jolly as possible, and quite ready to do the honours of their wards.

The guardians of St. Giles' Infirmary, Camberwell, propose, subject to the sanction of the Ministry of Health, to award a suitable medal, at a cost of about £2 2s., to the most efficient all-round nurse of the year. Dr. French, F.R.C.S., usually conducts the examinations.

We are not surprised to find the following criticism in Monday's *Daily Chronicle* :—

"Edith Cavell's monument made me blush for my country the other day. It was not because there were no fresh flowers around the base. Floral tribute to the dead is not everybody's taste, and I feel this brave nurse was of the sort who favour "no flowers by request."

hawkers of appallingly ugly "In Memoriam" cards and crinkled paper handkerchiefs, with which the achievements of our noted dead are honoured in the sight of the floating masses of our cities. Why should the manufacturers of these dreadful things have the entire monopoly of the "In Memoriam" trade? Would it not be worth the while of one of our English Christmas-card firms to produce something artistic in this line? It might still be sold in the gutter, and by the same men who hawk the present rubbish; and everyone would be the better off for the change."

Could not a committee of "trained nurses undertake the care of the Cavell Memorial statue, and keep it in beautiful order? To judge from the photograph of Edith Cavell's grave at Norwich reverent care is bestowed upon it.

The committee which carried to its completion the Nurse Cavell memorial is desirous of handing over the monument to public custody.

The Westminster City Council, having no power to incur maintenance charges for the statue, we understand that the First Commissioner of Works will be asked to take over the responsibility of custodianship.

On Monday an artistic tribute was placed at the foot of the Cavell monument by a delegate of the Association Dames des France. It consisted of a sheath of palms in bronze with white silk ribbons bearing in gilt letters the name of the association over a red cross.

Upon Miss Thurston's return to Christchurch, N.Z., after four years' fine Imperial war service as Matron-in-Chief of the New Zealand Expeditionary Force in Europe, she had a warm welcome home from her colleagues, but her position as Matron of the Christchurch Hospital was filled during her absence, and we agree with *Kai-Tiaki* that "this was considered scant courtesy to a lady who had borne her part in the war with integrity and credit."

It appears strange that whilst we in reactionary old England are debating whether or no private nurses should have an eight-hours' day, the graduate nurses of the California Hospital at Los Angeles, belonging to the Alumnae, should be petitioning for a twelve-hours' day, because nearly every patient has a special nurse, who remains on duty from sixteen to twenty-four hours! This petition was referred to the Los Angeles County Medical Society, which met members of the Nurses' Association, when an interesting discussion took place.

It was suggested as a remedy to meet the shortage for nurses that a number of nurses might club together and be known as the Community Nursing Service or Hourly Nurses' Club—preferably if they owned automobiles—and cover as much territory in twelve hours as convenient according to the illness of the patients, much as the Public Health Nurse works, and pro rate the charges to each patient.

The same thing might be accomplished in hospitals—one nurse caring for more than one patient on the same floor and pro rate the charges.

The fact is that most hospitals in California are paying concerns—some on a dubious basis. The nurses receive high fees as special nurses, but we are not surprised to learn that in the opinion of Dr. Haynes the average life of a nurse is from eight to ten years!

The *American Journal of Nursing* announces that the Nightingale Memorial Fund to keep alive the memories of those American nurses who died in the war, which is being raised by American Nurses in support of Dr. Anna Hamilton's great work for nursing education in France, now amounts to more than 30,000 dollars (£6,000). It is hoped to raise £10,000, but the time is short. We often notice that work of the highest order goes unsupported, whilst trashy schemes appeal to humanity.

The same Journal reports that:—

"Mlle. Matter and Mlle. Durlleman, two French nurses who have been visiting in America during the last few months, will leave soon for Lille, France, where they expect to establish a new nursing school on modern lines. Both are graduates of the Nightingale School at Bordeaux, and have had wide experience in nursing work."

While in New York they have been taking courses as guests of the Department of Nursing and Health, Teachers College, and have visited all the leading hospitals, and public health organisations, where they have been cordially welcomed. They have also made a round of several American cities, and feel that they are returning with many valuable ideas which they hope to apply in their new school.

All those who have had the great pleasure of meeting the French nurses here will watch with much interest the growth of this new child of the Nightingale School at Bordeaux, in which we all feel now that we have a special share."

American army nurses, who are claiming Army rank, won the first round when the Army Re-organisation Bill was before the House of Representatives on March 12th, when "Rank for Nurses" was granted in Committee of the whole House without a dissentient voice. The next step was to gain the approval of the Senate. We hope that by this time it has been secured.

Miss Helen Scott Hay, formerly chief nurse of the American Red Cross Commission to the Balkans, has been appointed as chief nurse of the American Red Cross Commission to Europe, to succeed Miss Alice Fitzgerald, who was promoted to be the Chief Nurse (Director) of the League of Red Cross Societies. Miss Hay has worked in Russia, Bulgaria, and the Balkans during the war, and was decorated by the Russian Government in 1915 with the Gold Cross of St. Anne, and by the King of Bulgaria with the Bulgarian Royal Red Cross in recognition of "splendid service done in the fulfilment of her profession."



## THE SOCIETY FOR THE STATE REGISTRATION OF TRAINED NURSES.

A meeting of the Executive Committee was held on Friday, April 16th. Mrs. Bedford Fenwick, President, was in the chair.

Amongst the correspondence replies to enquiries *re* "Nurse Juliet" were read from the Secretary to the War Office, Miss Beadsmore Smith, Matron-in-Chief, Q.A.I.M.N.S., and from Dame Sarah Swift, Matron-in-Chief, Joint War Committee, British Red Cross Committee, and the Order of St. John. The Hon. Secretary reported that she had not so far succeeded in locating this elusive personality referred to in the *Daily Telegraph* appeal for "Our Nurses."

### CONGRATULATIONS FROM NEW ZEALAND.

The following letter from Miss H. Maclean, Matron-in-Chief, Department of Public Health, Hospitals, and Charitable Aid, New Zealand, addressed to the President, was received with much pleasure:—

DEAR MRS. BEDFORD FENWICK,—I must write and heartily congratulate you on the news I have only just learnt from THE BRITISH JOURNAL OF NURSING, of December 27th. It is strange such great news as the passing of three Acts for the Registration of Nurses in the United Kingdom was not cabled. If it were I must have missed it.

It is a great reward for your long, determined fight, and I am sure that victory is really due to the Society for the State Registration of Nurses, and to you who for so many years have upheld the fight.

I shall eagerly look forward to seeing the regulations for training, examination, and registration, that will be formed by the responsible councils, for which I am glad to see a large number of nurses are to be selected. Conditions will, of course, be necessarily much more complicated than in this little country, where the State Registrar of Nurses has practically undisputed control and where his three nurse assistants with their knowledge of nursing, training schools, and nurses' requirements, have the responsibility of the two Registers of Nurses and Midwives.

The Act having been passed here twenty years ago, when trained nursing was in its infancy, nurses have grown up familiar with its conditions and appear to have no desire to alter any of them. I hope that the standard set for the home nurses may aid us in some of our difficulties, by imposing regulations that in order to be eligible for reciprocal registration we may at least maintain as near an approach as is possible, in a new country. At all events, let the Nurses' Act of the home country lead and point the standard to the Dominions rather than as in the Midwives' Act, be far below that set by these younger branches of the kingdom.

I am, yours truly,  
H. MACLEAN, *Matron-in-Chief.*

### ANNUAL MEETING.

It was agreed that the Annual Meeting should be held on Friday, May 28th, and that the future constitution and work of the Society should be discussed; the one object, to obtain our Act of Parliament for the State Registration of Nurses, having been attained.

New members were elected.

MARGARET BREAY, *Hon. Sec.*

## GENERAL NURSING COUNCIL FOR SCOTLAND.

### APPOINTMENT OF MEMBERS.

The appointment of the members of the General Nursing Council for Scotland, established by the Nurses Registration (Scotland) Act, 1919, has now been completed. The following is a list of the members of the Council:—

### APPOINTED BY THE PRIVY COUNCIL.

Captain CHARLES B. BALFOUR, C.B., Lord-Lieutenant of the County of Berwick.

### APPOINTED BY THE SCOTTISH EDUCATION DEPARTMENT.

Miss NORAH MILNES, B.Sc., Director of the School of Social Study and Training, Edinburgh University.

### APPOINTED BY THE SCOTTISH BOARD OF HEALTH.

Dr. A. K. CHALMERS, Medical Officer of Health, Glasgow.

Dr. KATHERINE CLARK, Assistant Medical Officer to the Edinburgh Education Authority.

Dr. H. E. FRASER, Medical Superintendent, Royal Infirmary, Dundee.

Colonel D. J. MACKINTOSH, C.B., M.V.O., Superintendent, Western Infirmary, Glasgow.

Miss MARGARET BELL, Queen's Nurse, Musselburgh.

Miss KATHLEEN L. BURLEIGH, Matron, Royal Hospital for Sick Children, Edinburgh.

Miss ANNIE WARREN GILL, R.R.C., Lady Superintendent of Nurses, Royal Infirmary, Edinburgh.

Miss MARY HUNTER, Public Health Department, Glasgow.

Miss ELIZABETH T. JONES, School Nurse, Edinburgh Education Authority.

Miss JANET MELROSE, R.R.C., Matron, Royal Infirmary, Glasgow.

Miss FLORENCE A. MERCHANT, Matron, Stobhill Hospital, Glasgow.

Mr. T. PRENTICE, Mental Hospital, Hartwood, Lanarkshire.

Miss MARGARET R. STEWART, Secretary and Treasurer, Scottish Nurses' Club.

Arrangements will be made by the Scottish Board of Health for convening the first meeting of the Council at an early date.

## THE MATRONS' COUNCIL.

The Quarterly Meeting of the Matrons' Council will be held by the kind invitation of the Committee and Matron, at the Queen's Hospital for Children, Hackney Road, N.E., on Friday, April 30th, at 3 p.m.

The guests will visit the wards before the business meeting.

Motor buses No. 6 and No. 54 pass the Hospital doors. A quick way is to take the Tube to Liverpool Street then on by bus.

# Royal British Nurses' Association.



(Incorporated by

Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## THE BANNER OF THE ROYAL BRITISH NURSES' ASSOCIATION.

The Banner of the Royal British Nurses' Association has now reached the Office from the Royal School of Art Needlework, at which it has been embroidered. As will be remembered, a small group of the younger members formed themselves into a committee on the passage of the Nurses' Registration Bill and decided to inaugurate a scheme to supply their Association with a Banner as a memento of this victory for the nurses. They and all the members who have so generously co-operated with them may congratulate themselves upon having supplied their Royal Corporation with a Banner of which it has just reason to be proud and which doubtless will be regarded as one of its most treasured possessions for centuries to come. But particularly do we owe an expression of warm gratitude to Miss Grace Anderson, M.R.B.N.A., who has done practically all the work connected with the banner so far as the R.B.N.A. office is concerned.

The Banner is embroidered most exquisitely on *bleu de roi* silk, with the Badge of the Association—in rose colour on cloth of gold. The date of the foundation of the Association, "1887," is inscribed over the Badge, and the motto, "Steadfast and True," on a gold scroll beneath it. The Royal Crown in colours appears in the centre of the Badge, and the national flowers—the rose, thistle, shamrock, and leek—support it, beautifully embroidered in natural colours. Altogether a most lovely Banner for our Royal Corporation of Nurses.

The Nurses hope that, at some early meeting, Her Royal Highness the President may be graciously pleased to "present the colours" (*i.e.*, the Banner) to the Association and, meantime, the members are invited to take tea at 10, Orchard Street, from 3.30 to 5.30 p.m., on Saturday May 1st, when they will be able to inspect the Banner for themselves. For the benefit of those members who have joined the Association recently we will also have the Royal Charter brought from the strong-room at the Bank on that day.

## THE HOURS OF EMPLOYMENT BILL.

At the quarterly meeting of the General Council, a communication was drafted to be forwarded

to the Minister of Labour in connection with the Hours of Employment Bill. The Council, while advocating the adoption of the forty-eight hours' week for nurses in Hospitals and institutions and in the public services, consider that the nurses engaged in private practice should not be legislated for as regards their hours on duty, but should be free to arrange their own terms.

## TRAINED NURSES' ANNUITY FUND.

We have pleasure in announcing that just as we go to press, the news has reached us that under the will of the late Mr. Septimus Daws, a legacy has been bequeathed to the Trained Nurses' Annuity Fund. We do not know the exact amount but it is probable that it will be over £1,300.

We would remind the R.B.N.A. members that the second Princess Christian Annuity is not yet quite completed and also of the sale of work which is to be held again in the autumn. Last autumn many nurses purchased their Christmas presents at the sale of work, with the result that quite a considerable sum was obtained towards founding a fresh annuity for a sick or aged nurse. We are anxious that the nurses should take a keen interest in the Annuity Fund, which is the oldest benevolent fund for nurses, and we hope that before long they will make it self-supporting for the nursing profession by the nursing profession.

## MRS. KENNETH STEWART'S MUSICAL "AT HOME."

On Sunday last Her Royal Highness Princess Christian, and Their Highnesses the Princess Helena Victoria and Princess Marie Louise, honoured Dr. and Mrs. Kenneth Stewart by their presence at an At Home at 52, Wimpole St., W., to the members of the Royal British Nurses' Association, of which Association Dr. Stewart is the popular Hon. Treasurer. The fine Drawing-rooms were crowded by members, who listened with the greatest appreciation and pleasure to such famous musicians as M. Mannucci, the celebrated cellist; Mr. Gervase Elwes, the entrancing tenor; and Miss Susanne Morvay, a marvellous pianist.

M. Mannucci, accompanied at the piano by Mr. Anthony Bernard, held his audience in thrall as he

rendered the "Kol-Nidrei" of Max-Bruch, and later an "Irish Lullaby," and excelled himself in the "Scherzo" of Van Goens.

The singing of old English ballads by Mr. Gervase Elwes charmed all his hearers. "So Sweet is Shee" (seventeenth century), "Bredon Hill" and "Brittany" brought down the house; and although Mr. Elwes had given us six songs, he generously gave an encore selected by Her Royal Highness the President.

Of the magnificent power as a pianist of Miss Susanne Morvay there was no doubt from the moment her fingers touched the keys, and her charming smiles flitted away, leaving her expressive face to indicate the forceful emotions which inspired her genius. Never, surely, were a player and her instrument more in harmony!

Miss Morvay opened with selections by Chopin 1. Etude, F. Minor, Op. 25, No. 2, followed by Etude, F. Major, and a Valse, concluding with the magnificent Polonaise, A Flat.

Later she rendered the "Arabesque," by Debussy, quite exquisitely, and enthusiastic applause followed her splendid performance of Liszt's Rhapsodie, No. VI.

The selection of music at this concert was a rare and delightful treat, and charmed everyone present, including the Royal ladies, whose knowledge and appreciation of fine music is well known.

We once heard Dr. Stewart say that when he did entertain the nurse members of the R.B.N.A. he would see to it that the music should be the finest he could procure; and after the festival on Sunday we heard one of the guests say, "It lifted me into Paradise."

At the end of the concert everyone was invited to tea—and thoroughly enjoyed the dainties provided, and many confided in us that their thanks, to their host and hostess seemed to fall far short of all that they wished to express.

After the concert, the following had the honour of being presented to Her Royal Highness the President:—Mrs. Temple-Mursell (Lady Consul of the R.B.N.A. in South Africa), and Mr. Temple Mursell, Dr. Mayo (member of the Council of the South Australian Branch), Miss Halkett, of Pittfirrane, Dunfermline, and Miss Ethel Budd.

#### BALLADS SUNG BY MR. GERVASE ELWES.

##### SO SWEET IS SHEE.

Have you seen but a whyte lillie grow  
Before rude hands had touched it?  
Have you mark't but the fall of the snow  
Before the earth had smutcht it?  
Have you felt the wool of the beaver  
Or swan's down ever?  
Or have smelt of the bud of the bryer,  
Or the nard in the fire?  
Or have tasted the bag of the bee?  
O so whyte! O so soft!  
O so sweet is Shee!

Ben Jonson.

#### IN SUMMERTIME ON BREDON.

GRAHAM PEEL.

In summertime on Bredon,  
The bells they sound so clear;  
Round both the shires they ring them,  
In steeples far and near,  
A happy noise to hear.

Here of a Sunday morning,  
My love and I would lie,  
And see the coloured counties,  
And hear the larks so high  
Above us in the sky.

The bells would ring to call her  
In valleys miles away:  
"Come all to church, good people;  
Good people, come and pray."  
But here my love would stay.

And I would turn and answer  
Among the springing thyme:  
"Oh, peal upon our wedding,  
And we will hear the chime,  
And come to church in time."

But when the snows at Christmas  
On Bredon top were strown,  
My love rose up so early  
And stole out unbeknown,  
And went to church alone.

They tolled the one bell only,  
Groom there was none to see,  
The mourners followed after,  
And so to church went she,  
And would not wait for me.

The bells they sound on Bredon,  
And still the steeples hum:  
"Come all to church, good people"—  
"Oh, noisy bells, be dumb;  
I hear you, I will come."

A. E. Housman.

#### DONATIONS.

The Hon. Treasurer acknowledges with thanks the following donations to the General Fund of the Corporation:—

2s. 6d.—Misses A. Bartlett, Bayles, V. Boole, A. Briggs, C. Brunt, L. Cheetham, H. Collier, M. Drakard, D. Evans, R. Fowler, M. Hart, B. Kent, C. Orr, M. Owen, M. Pritchard, H. Rawlings, M. Saunders, A. Shepherd, E. B. Smith, L. Wilson, and A. Young.

1s. 6d.—Misses E. Brodie, H. Dean, C. Dempster, S. Watts, and M. Winter.

1s. 3d.—Misses C. Clarke and M. Coates.

1s.—Misses E. Balding, A. Bennett, S. Davidson, R. Edwards, E. Glanville, A. Gray, L. Holdsworth, L. Lee, L. North, A. Soolby, E. Spearing, Stephen-son, M. Strange, F. Tudor, C. Ward, I. Webber.

#### SETTLEMENT FUND.

£1 1s.—Miss H. Laurence, Miss Schafer, and Miss Welch.

ISABEL MACDONALD,

Secretary to the Corporation.

10, Orchard St., W.

## PROFESSIONAL UNION OF TRAINED NURSES.

Miss Maude MacCallum, Hon. Secretary of the P.U.T.N., desires to contradict the statement which appears in the recently-issued Annual Report for 1919, of the Nurses' Co-operation, 22, Langham Street, W., that she has resigned from the Co-operation. At an informally-summoned meeting, on February 10th, Miss MacCallum and two of her colleagues were asked to resign, which they all refused to do.

At the Public Meeting for Nurses, convened by the Union, to be held at King George's Hall (London Central Y.M.C.A.), Tottenham Court Road, on Saturday, April 24th, at 2.30 p.m., Mrs. Paul will be in the Chair. The following will be amongst the speakers:—Miss Anderson Parsons (late Matron), Miss C. M. Alderman (Public Health), A. Welby, Esq., M.D. (Secretary Medico-Political Union), G. Naylor, Esq., J.P., and Mr. Sydney Paxton.

## NURSING IN THE HOUSE OF COMMONS.

GRATUITIES FOR NURSES TEMPORARILY ATTACHED TO THE INDIAN ARMY NURSING SERVICE.

On April 15th, Brigadier-General Croft (M.P. Bournemouth) asked the Secretary of State for India "whether he would explain why nurses temporarily attached to the Indian Army Nursing Service who have done such good work on active service, both on hospital ships between Mesopotamia and German East Africa and Bombay have been refused a gratuity by the Pay Department in India whilst members of the Indian Army Nursing Service have received such gratuity, in spite of the fact that the temporary nurses did their full share of work and had to put up with many discomforts in the discharge of their duties."

Mr. Montagu replied: "The Government of India were authorised, on the 11th March, to issue the gratuity to the temporary nurses, and payment will be made as soon as possible."

### NURSES AND 1914 STAR.

Lieutenant-Colonel Fremantle (C.U., St. Albans) asked the Secretary for War whether nurses sent to Malta on active service in 1915 were ineligible for the 1915 medal, while nurses serving in Alexandria under similar conditions were entitled to it; and whether there were any reasons, other than those of administrative convenience, why equal services in Malta should not be equally recognised." Mr. Churchill replied: "Service on the establishment of a unit in a theatre of war is essential to qualify for the award of the 1914-15 Star. Malta was not a theatre of war and nurses who served there in 1915 are consequently not eligible for the Star."

## A COURAGEOUS ENDEAVOUR.

Miss Emily Horton, a nurse trained at Guy's Hospital, is now being treated in that institution for injuries to the head and spine, sustained in courageous endeavour to prevent a delirious patient to whom she was acting as night nurse at a nursing institution at Theydon Bois, Essex, from throwing himself out of a second-floor window. In so doing she fell out with him and was seriously injured. We sincerely hope she will make a good recovery.

## APPOINTMENTS.

### MATRON.

**Children's Hospital, Sunderland.**—Miss Sarah J. Bainbridge has been appointed Matron. She was trained at the Royal Infirmary, Bradford, where she subsequently held successively the positions of Casualty and Out-patient Sister, Theatre Sister, and Night Sister, and of Assistant Matron at the Rawden Auxiliary Hospital in connection with the Royal Infirmary, Bradford. Since 1919, she has been Assistant Matron at the Aberdeen Royal Hospital for Sick Children, Aberdeen.

**Kidderminster Infirmary and Children's Hospital.**—Miss Ada White has been appointed Matron. She was trained at St. Bartholomew's Hospital, London, and has been Assistant Matron at the Reigate and Redhill Hospital, Assistant Matron at the General Hospital, Nottingham, mobilised (T.F.N.S.) October, 1914, and served first year of war at 1st London General Hospital, Camberwell, then three and a half years in France and Belgium as Sister-in-Charge of an Ambulance Train, and Sister-in-Charge of a Casualty Clearing Station. Demobilised, April, 1919.

**Brook Hospital, Shooters Hill, S.E. (M.A.B.)**—Miss E. M. Bradley has been appointed Matron. She was trained at the Southwark Infirmary, East Dulwich, and has held the position of Sister at the Camberwell Infirmary, Home Sister at Wandsworth Infirmary, Assistant Matron at the Hackney Infirmary, Matron at the Salford Infirmary, Manchester, and Matron of the Eastern Hospital, Homerton, under the Metropolitan Asylums Board.

**The Sanatorium, Little Heath, Erith, Kent.**—Miss Hannah Jones has been appointed Matron. She was trained at the Royal Infirmary, Manchester, and has held the position of Sister at the Plaistow Hospital, E., Matron at the Cottage Hospital, Chalfont St. Peter, and Assistant Matron at the Hospital for Sick Children, Great Ormond Street, W.C.1.

**Royal Maternity and Simpson Memorial Hospital, Edinburgh.**—Miss Bett has been appointed Matron. She was trained at the Edinburgh Royal Infirmary, and at the Royal Maternity and Simpson Memorial Hospital, where she also held the position of Sister, and is at present Matron at the Birmingham Maternity Hospital.

### NIGHT SISTER.

**County Hospital, York.**—Miss E. Violet Arlidge has been appointed Night Sister. She was trained at St. Bartholomew's Hospital, and has been Sister at the Royal Ventnor Hospital, and Sister in Charge of an Auxiliary Hospital, Bradford.

### SISTER.

**County Hospital, York.**—Miss Winifred Cross has been appointed Sister. She was trained at St. Thomas' Hospital, London, and has held the position of Sister at No. 5, General Hospital, London, and at the Welsh Hospital, Netley.

## QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

### QUEEN ALEXANDRA PRESENTS GOLD BADGE TO MISS PETERKIN.

Her Majesty Queen Alexandra was graciously pleased to receive Miss Annie McWillie Peterkin, the General Superintendent of the Queen Victoria's Jubilee Institute for Nurses, at Marlborough House, on April 16th, in order to present the Gold Badge, which has been awarded to Miss Peterkin for her long and distinguished service under the Institute.

Miss Peterkin was enrolled as a Queen's Nurse on January 1st, 1894, and has worked in connection with the Institute continuously since that date, having held the posts of Superintendent, Inspector, Superintendent for Ireland and Scotland, before her appointment as General Superintendent in 1917.

Sir Harold Boulton, Bt., the Chairman of the Council was also received by Queen Alexandra.

The work of the Queen's Institute has developed rapidly, especially during the last eighteen months, the number of new Associations in 1919 being the largest recorded in any one year. There are at the present time over 4,500 nurses working in connection with the Queen's Institute, and it is impossible to estimate too highly the good that is being done by these women, who, in addition to nursing the sick, undertake the many branches of preventive work which are doing so much to improve the standard of health of the nation. There is a great need for more nurses and for additional funds.

Anyone interested is invited to apply to the Central Office, at 58, Victoria Street, S.W. 1.

### TRANSFERS AND APPOINTMENTS.

Miss Daisy F. Tough is appointed to Northampton, as Assistant Superintendent; Miss Helena Mathieson to Barrow-in-Furness as Senior Nurse; Miss Edith J. M. Bell to Kinver; Miss Mary H. Bevington to Talke Colliery; Miss Hilda Boston to Glos. C.E.A. as Emergency Nurse; Miss Beatrice Carr to Norton; Miss Mary A. Conalty to Godalming; Miss Lillias Fraser to Accrington; Miss Mary W. A. Gillmor to Nelson; Miss Margaret Heritage to East London; Miss Lily M. Jenkins to Beckenham; Miss Edith A. Morris to Consett (Medomsley); Miss Sophie Morrow to Paddington; Miss Sarah Norledge to Grimsby; Miss Gladys M. Foskitt to Paddington; Miss Annie K. Roche to Harrietsham and Lenham; Miss Elsie E. Smith to Central St. Pancras; Miss Annie R. Street to Norbury; Miss Phyllis S. R. Stynes to East London; Miss Evelyn Welch to Chelsea.

### FEVER NURSES' ASSOCIATION.

The annual general meeting of the above Association will be held on Saturday the 8th of May at Croydon Town Hall at 2.30 p.m., when Dr. R. Veitch Clark, will deliver his presidential address.

All members of the Association are specially requested to be present. There is a good service of trains to East Croydon from London Bridge or Victoria (L.B. & S.C.) or Charing Cross (S.E.)

## THE HOSPITAL WORLD.

There is a very general feeling that Poor Law Infirmarys should now be called Hospitals, and the question is under consideration by several Boards of Guardians. Since the agreement between the Bradford Corporation and the Bradford Board of Guardians, in respect of utilising St. Luke's Hospital as a municipal general hospital, approved by the Minister of Health, other authorities are anxious to do likewise. This arrangement enables the Bradford Corporation to treat the sick, irrespective of their economic circumstances, and avoid the stigma attached to Poor Law treatment.

In this connection Mr Leonard Lyle, himself the chairman of an excellent voluntary hospital at Stratford, E., asked Dr. Addison whether, before sanctioning further hospitals supported out of public funds, he will consider the position of voluntary hospitals, which have for years done invaluable public work, which are now hard pressed for funds.

In his reply Dr. Addison said he fully appreciated the value of the work done by the voluntary hospitals, but pending further legislation which they were preparing, he must consider cases on their merits as they arise.

Most of our large hospitals are in need of huge sums of money to keep going, but where it is to come from at present is not apparent. The charitable middle class is now taxed out of existence, so the great industrial profiteers, and the highly paid industrial classes must settle it between them. Parliament is not in the mood at the present moment to take over the cost of the voluntary hospitals, and the managers of the voluntary hospitals are convinced their management could not be bettered by State control. These controversies will continue in the meanwhile, everyone objecting to change—as is constitutional in these islands—and then quietly and by degrees great changes will be effected, and obstruction will cease. It was so with Women's Suffrage, Registration of Nurses and other mighty matters. We have a genius for caring for sick people, and if good people are deprived of this pastime, we agree many will be at a loose end. Charity and fatherly interference, and the recognition which results, so far as the sick poor are concerned, are ours by right, and till the sick poor are no longer with us, we shall fight for these rights. Every day, however, the sick poor object more strenuously to be made objects of charity, and it is when they realise it would be quite easy to escape from the rôle, that this difficult question will be solved. People must be taught the value of Health—vigorous, glorious Health—how to secure it and how to maintain it. They must be taught that they must pay for this fine heritage, if need be by the sweat of their brow; then we shall enter upon a new dispensation, and philanthropy will no longer be utilised as a sop to Cerberus.

## SIR VICTOR HORSLEY.

*(Continued from page 229.)*

Of Sir Victor Horsley's brilliant work as a surgeon at University College Hospital, and the National Hospital, Queen Square, in connection with the surgery of the brain, all the world knows. In 1910, the General Elections in January and December of that year brought him with a rush into public life. With characteristic thoroughness and energy he placarded his house with cartoons, the big loaf and the little loaf, and the peer and the working man, and rented a hoarding where the old Vere Street Post Office was in course of demolition. In the December election, he stood for the University of London. He failed to get into Parliament, and he did not live to win success out of failure, but he "never doubted of the necessity and the righteousness of a great political upheaval; fought for that, not for his own ends. . . Last, it is to be remembered that the course of events has already brought unexpected fulfilment of purposes for which he fought."

## WOMAN'S SUFFRAGE.

It was his staunch support of the woman's suffrage cause, and his condemnation of the "Cat and Mouse" Act that lost him his chance as Parliamentary candidate for Market Harborough. In this connection Mr. Paget does him less than justice. He writes:—"Probably the harm was done not by what he said in the constituency, but by what he was saying in London, and writing in the London papers. Some of these papers found that his unrestrained sayings were 'good copy'; for example, his speech at a Queen's Hall meeting, July 8th, 1913, on the Temporary Discharge of Prisoners Act, the 'Cat and Mouse Act.' He so hated the thought of women being forcibly fed that he did not care what gibes and platform epithets he flung at the Home Secretary and others; he just let himself go. He had published certain statements about forcible feeding which the Home Secretary had referred to the President and Council of the Royal College of Surgeons; they had declined to interfere. Here, said Horsley to the meeting was Mr. McKenna—whom he nicknamed Viscount Holloway—seeking his revenge by secret intrigue. Fancy a Home Secretary thus secretly intriguing against private citizens. . . What an end to a back-biting intrigue by a Minister of the Crown. Such always will be the result of changing Government by Law for Government by a bureaucratic and secret police. It is no wonder that the Harborough Association was frightened."

That was, of course, in regard to the election, purely a question of politics, but some of those present at that Queen's Hall meeting will not soon forget his noble, deadly impeachment, of the prison methods of forcible feeding, and of the Government which authorised it, and his condemnation of the prostitution of medical knowledge to punitive instead of remedial purposes.

Probably not many realised, as he no doubt did, that each incisive word sounded the death knell of his justifiable aspirations for Parliamentary honours. But his closely reasoned, and unanswerable speech gained in force by being lifted on to the plane of self-abnegation and apostolic ardour. There are defeats which are greater than victory, and were he living now there are enfranchised women who would have seen to it that he represented them in Parliament.

## VENEREAL DISEASES.

On the subject of Venereal diseases, his evidence before the Royal Commission was on lines which are now commending themselves to many thoughtful people. (1) Confidential death certificates; (2) more education of children in the facts of sex; (3) more education of adults in the facts of venereal disease; (4) the confidential notification of venereal diseases; (5) protection for any doctor who should warn persons against the danger of infection from this or that one of his patients.

## THE SHORTAGE OF NURSES.

In June, 1914, he attended the Birmingham Conference of the National Council of Trained Nurses of Great Britain and Ireland, and gave an address on Nursing under the Insurance Act, in which he discussed the reasons for the shortage of trained nurses, chief among them that "the remuneration of nursing as a skilled and learned work is insufficient," and secondly, the long hours. "Lastly we have to recognise the competition of other channels of work, equally or better paid, and giving greater liberty."

## PROFESSIONAL POLITICS.

"The administrative affairs of his profession, its place in the social system, its influence on the mind of the community, were of unfailing interest to him. . . its politics were never dull to him." We can well believe it when we remember how closely he followed the campaign for the State Registration of Nurses in the stress and strain of his work in Mesopotamia. The last words of his last letter to the President of the Society for the State Registration of Trained Nurses were: "I am only daily regretting that I cannot be working for the great cause at home."

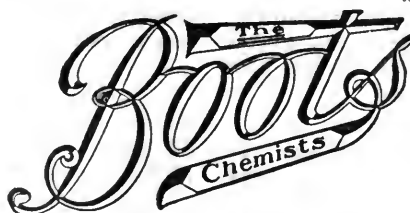
He was no respecter of persons. "Always he lived up to the difficult saying: 'All men are equal in the sight of God,' " but the "readiness to find fault with people in high places (from archbishops downwards) was reconciled in him—he was full of vivid contrasts—with unceasing thoughtfulness for those who neither were, nor ever would be anywhere near the high places. . . . He adopted into his life not the first half only, but the whole of the text: "Deposuit potentes desede: et exaltavit humiles."

"His love of his profession was not sentimental; it was clear sighted, masterful and creative. As he came to be on the side of democracy, so he came to regard his profession as a trade-union: it was of a kind apart, for its members did a vast





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**555 BRANCHES IN TOWN AND COUNTRY**

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amount of work for nothing, nor could they strike. None the less, it was a secular body of men of business, whose object was to gain a livelihood; and many of them could not earn so much as they deserved, but were overworked, underpaid, put-upon, ill-organised, and ill represented. He longed for every one of them to have a good time. That is the abiding spirit of all his actions in professional politics. The set scenes for it were (1) the Medical Defence Union, (2) the General Medical Council, (3) the Royal College of Surgeons, (4) the British Medical Association."

Amongst the questions in connection with the British Medical Association in which he took a very active and prominent part were the constitution of a Ministry of Public Health and State Registration of Nurses

#### THE "NASTY COLLEGE."

"How hard he worked is shown by the mass of his correspondence, notes for addresses, minutes, of meetings, reports, and press cuttings . . . the registration of nurses in England occupied him even in Mesopotamia; he writes to Dr. Alfred Cox, on May 15th, 1916; he is angry over the new College of Nursing, and says unkind things of its supporters: 'I have just received the report of the conference between — and the Registrationists. It is very difficult out here, some three hundred miles up the Tigris, in a burning mud flat in the middle of cholera, dysentery, diarrhoea, &c., &c., &c., to judge exactly what is being done at home, but it is quite clear that all the old enemies of the B.M.A. are behind — and pushing his nasty College for all they are worth. It seems to me that it being only a manoeuvre to push off Registration, the B.M.A. ought to support Chapple and his Bill more actively. Also that our present representatives on the Central Committee to run the Bill must do much more to fight this vile private hole-in-the-corner arrangement. Considering that we have been working for twenty-five years, it is a little too much to see the whole thing jockeyed. . . . The idea of starting a College, not a truly educational body, but the sham archaic examinational institute for private registration that we have suffered from so bitterly all these years, is so like the enemies of liberty. . . . It is very annoying being in all this chaos of folly and not able to help at home.'"

#### THE FIGHT AGAINST ALCOHOL.

His strenuous fight against alcohol was only one of his many activities. "After 1900 Horsley led the fight against alcohol in this country. It had many leaders, but none quite equal to him, with his authority in science and practice, his mastery of the art of lecturing, his constant use of a wealth of diagrams and lantern slides, his courtesy towards his audiences. It is possible that his lectures would have been the better for more lightness; there is a pleasant touch of relief in one of them, where he describes our three most British institutions—John Bull, Father Christmas, and Henry VIII—as examples of fatty degeneration

due to chronic alcoholism; but these touches are rare."

#### WHY WASTE A MINUTE?

Mr. Paget relates a story told by Miss Lowenstein, who wanted his help to get the teaching of hygiene and temperance introduced into schools, by means of a petition from the medical profession to the Board of Education. He set to work at once and Miss Lowenstein came to London "to fetch and carry." She remembers him at Cavendish Square, one evening, coming in just at dinner time, and asking her to get out some papers. "The gong will sound in a minute," she said. "And why should we waste a minute?" he said, and took the papers to the dining-room, corrected a proof with his left hand, fed himself with his right, and joined in the talk. It was always easy for him to do two or three things at the same time, or, as Charles Beevor said, "Horsley has three brains."

(To be concluded.)

#### LEGAL MATTERS.

A case of considerable interest and importance to nurses, especially those engaged in private practice, was heard in the Bloomsbury Court, Great Portland Street, W., by His Honour Judge Bray, on April 20th. The plaintiffs were the Mental Nurses' Association, Ltd., 54, George Street, Manchester Square, W., who sued Nurse Mary Downie, formerly in their employment, for breach of agreement in respect to a private case to which she was originally sent by them. The Judge, after hearing the evidence, reserved judgment. We hope to refer at length to this case next week.

#### PSYCHOLOGY OF THE SPRING HAT.

How the spring sunshine shows up the pin-pricks and other defects of one's winter hat! And the new season's models now being shown in their recently extended showrooms by "Mills," 296, Regent Street, break all one's good resolutions as to renovations of last year's chapeaux. One simply must have something fresh and flowery. What ever may be the psychological influence of other items of dress, a new hat makes a new woman of us all!

#### COMING EVENTS.

April 24th.—Central Committee for the State Registration of Nurses. Meeting, Council Chamber, by kind permission of the British Medical Association, 429, Strand, W.C. 2.30 p.m.

April 24th.—Professional Union of Trained Nurses. A meeting will be held at King George's Hall (London Central Y.M.C.A.), Tottenham Court Road. 2.30 p.m.

April 30th.—Matrons' Council Quarterly Meeting. Queen's Hospital for Children, Hackney Road, N.E.

May 1st.—Royal British Nurses' Association. Inspection of Banner and Royal Charter, 10, Orchard St., Portman Square, W. Tea 3.30 to 5.30 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### NURSES AND THE HOURS OF EMPLOYMENT BILL

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The enclosed is the reply to my letter to the Minister of Labour. I have also written to our M.P. Hoping our letters may have weight, and with every good wish for the cause.

I remain, sincerely yours,  
ELIZABETH THOMPSON, R.N.S.

[COPY OF REPLY.]

Montagu House, Whitehall,  
London, S.W. 1.  
April 13th, 1920.

MADAM,—In reply to your letter of April 11th on the subject of the Hours of Employment Bill, I am directed by the Minister of Labour to inform you that in the application of the Bill to the Nursing Service, every precaution will be taken to ensure that nothing is done which would prejudice the Service.

I am, Madam,  
Your obedient servant,  
W. EADY.

Sister Elizabeth Thompson,  
The Registered Nurses' Society,  
431, Oxford Street, W. 1.

[The more private nurses who express their opinions to the Minister of Labour the better.—ED.]

### FREEDOM FOR NURSING PRACTITIONERS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—You ask an expression of opinion on hours of employment for private nurses but I think your own opinion states the matter exactly, *i.e.* that "private nurses are private practitioners, and that therefore a give-and-take system is inevitable."

As a private nurse of some years' standing. I know it would be quite impossible to limit one's hours on duty, nor would it be fair to our patrons, who are really very good to us! Therefore, to my mind, no other system *can* be evolved which would not amount to interference with the liberty of the subject, in the case of the trained nurse, who, having "won her spurs," practises on her own account. I think you will also agree that the ranks of private nurses are never too full to admit every trained woman to whom this branch appeals?

In institution work the need for shorter hours is very great and very urgent, and although private nurses have their hardships, too, long hours is not one of these, save in exceptional, and wholly justifiable circumstances.

Regretting this too long letter and appreciating always, with thousands of other workers, your helpful interest in every branch of our noble service.

I am, dear Editor, yours very truly,  
A. E. MACDONALD (Sister).  
Impérial Hotel, Paris.

### PROHIBIT "SLEEPING DUTY."

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—In reply to your request for the opinion of Private Nurses regarding an eight-hour day, I beg to say that I do not think it practicable. If patients were seriously ill it would necessitate the employing of three nurses, and very few could afford that. What I would suggest (if I may be allowed to do so) is that "sleeping duty" should be strictly forbidden, and on no account should Private Nurses be asked to sleep in the bedroom of their patient. A twelve-hour day, with three hours off duty, or even two hours, could always be arranged to meet the requirements of the average cases. I am a Private Nurse and expect to take up that work again when I am demobilised, and the two things I hope to see abolished under the Registration Act are "Sleeping duty," and sleeping in the bedroom of patients.

I am, Madam,  
Yours faithfully,  
E. P. TODD,  
Sister Q.A.I.M.N.S.R.

"Torwood," Evelyn Gardens,  
Cavehill Road, Belfast.

### KERNELS FROM CORRESPONDENCE.

Miss N. Copeland, M.R.B.N.A. :—"I am sure we should lose work by the adoption of an eight-hours day, and the untrained woman would be employed more even than she is at present."

Miss Amy Walker, London :—"I have had the happiest experience during my private nursing. Mothers and fathers have been most grateful, husbands and wives also, and during convalescence I have enjoyed delightful treats, motoring in many parts of England, trips to the sea-side, books to read, and made to feel quite one of the family. All this good feeling would be done away with if we nursed by the clock."

### OUR PRIZE COMPETITIONS.

#### QUESTIONS.

April 24th.—What is meant by (a) cross infection, and (b) concurrent double infection? How may cross infection arise? What measures are adopted in hospital for its prevention? Give some examples of concurrent double infection.

May 1st.—State (1) How to organise an eight hours' day for nurses in hospitals, (2) How to organise a forty-eight hours' week for nurses. State (a) the number of beds in ward, (b) the number of nurses required for duty in ward. State hours on and off duty.

# The Midwife.

## THE INFANTS' HOSPITAL.

The Infants' Hospital, Vincent Square, Westminster, S.W.1, fulfils a most useful and unique function, and all midwives and district nurses should acquaint themselves with its work. It has two objects: (1) To place the management of infants and the treatment of the disorders and diseases of nutrition occurring in infants upon a scientific basis; and (2) to investigate and demonstrate the means by which the prevalent disease and mortality among infants may be prevented. Like most voluntary hospitals, it is suffering from a depleted exchequer and a growing debt, attributed in the annual report to the income not having increased sufficiently to meet the advance in price of commodities and labour. It would, however, be a national loss if the fine work of this hospital were restricted or imperilled for lack of support, and we hope its friends will come to the rescue. The teaching, by precept and practice, as to the supreme importance of a pure milk supply and the Lectures on Infant Feeding and Management intended for nurses, health visitors, and others interested in the study of infant life delivered periodically by the physicians in the Lecture Theatre of the Hospital, are of very great value. They should, indeed, be even more widely used and known than at the present time, and pupil midwives, in addition to the work required of them by the Central Midwives Board, would acquire valuable knowledge if they attended one of these courses of lectures, particulars of which are obtainable from the Secretary of the Hospital.

The training of nurses for infants is also an important part of the work of the hospital, and before their probationary period (eighteen months) is complete they receive an extended and practical training in the care and management of babies.

## THE ECONOMICS OF MATERNITY.

The Second Summer School organised by the National Union of Societies for Equal Suffrage to be held at Ruskin College, Oxford, from Saturday, August 28th, to Saturday, September 11th, is of special as well as general interest. One of the subjects to be considered is "The Economics of Maternity," including the Problem of Population, National Family Endowment, Widows' Pensions and the Unmarried Mother.

The object of the Summer School is to meet the needs of men and women interested in problems of citizenship, both local and national, with special regard to women's questions. In particular it aims at providing for women who desire it

a short intensive preparation for the new opportunities of work opened up by recent legislation, including the Sex Disqualification (Removal) Act. Information can be obtained from the Directors, N.U.S.E.S. Summer School, Evelyn House, 62, Oxford Street, London, W.1.

## THE EFFECT OF HOUSING AND SANITARY CONDITIONS ON MATERNITY AND CHILD WELFARE IN INDIA.

A correspondent of the *Pioneer*, says the *Lancet*, makes some pertinent remarks on this subject. On all sides schemes are being promoted to improve the condition of Indian mothers and to provide skilled attendance at childbirth. But their antenatal conditions cannot be ameliorated until the housing conditions have been improved. Improvement is not likely to be rapid, since the housing of menial classes, even of those employed by Government mills, railways, &c., under European or educated supervision, is still very bad. The employees are lodged in rooms 10 ft. by 10 ft., and more often than not built back-to-back to save a party wall. The usual type of house has in front a useless 5 ft. verandah and a zenana courtyard surrounded by a 7 ft. wall, in which is also housed the family's latrine. This arrangement effectively prevents the entrance of light and air into these cells, the condition of which with neither light nor through ventilation is anything but conducive to general health of a family. Improvement of antenatal conditions for an expectant mother is thus impossible. It is useless under these conditions of housing to talk of inculcating domestic sanitation and hygiene; nor, considering the dirty earthen floors and the cells used as living rooms, can infantile mortality be reduced from the appalling figure at present prevailing among the poorer Indian classes.

## SMITH v. CENTRAL MIDWIVES' BOARD.

In the King's Bench Division of the High Courts of Justice on Thursday, April 15th, Mrs. Lucy Smith applied for her costs in connection with her appeal to the Courts against the removal of her name from the Roll of the Central Midwives Board on April 16th, 1919.

When the case originally came before the High Court, it was sent back to the Central Midwives Board who retried it, in view of the fact that fresh evidence was available when the resolution directing the removal of Mrs. Smith's name was rescinded. Mrs. Smith then applied for her costs, but at the hearing before the Lord Chief Justice, Mr. Justice Avory, and Mr. Justice Roche, the judgment was that both sides should pay their own costs.

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
**THE NURSING RECORD**  
EDITED BY MRS BEDFORD FENWICK

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SATURDAY, MAY 1, 1920.

Vol. LXIV

## EDITORIAL.

### THE DUTIES AND POWERS OF THE GENERAL NURSING COUNCILS.

The appointment by the Minister of Health of the General Nursing Council for England and Wales, by the Scottish Board of Health in Scotland, and the Chief Secretary in Ireland, should make all nurses alert to understand what are the powers conferred by Parliament on their Governing Bodies in the Nursing Acts.

These are mainly (1) to form and keep a Register of Nurses for the Sick, (2) to define and maintain educational standards, (3) to regulate the conduct of the examinations which may be prescribed, and to regulate any matters ancillary to these examinations, such as the appointment of examiners, (4) to enforce discipline, (5) to issue certificates to registered nurses, (6) to make regulations in regard to the uniform and badge to be worn by registered nurses, and last but not least, to regulate the finances of the Council. The General Nursing Councils are, therefore, essentially educational and disciplinary bodies.

It is on these accounts that it is so important that the members of the Councils should include representatives of all sections of the Nursing Profession. In regard to the definition of educational standards and examinations, most important and responsible functions, it is presumable that the Matrons of Nurse-Training Schools and the medical members are those whose advice will be of the greatest value, but, where the discipline of members of the profession is concerned, the rank and file have the right to be represented, and it is essential that they should be. This is a point for which the nurses' societies organised in the Central Committee for the State Registration of Nurses have consistently contended.

It is therefore very satisfactory to find that in appointing the First General Nursing Council for England and Wales the Minister of Health has considered the representation of all sections of the profession, and we find represented upon it, among the sixteen nurses whom he has appointed, not only Matrons of Training Schools, but experienced and independent nurses. In matters of discipline it is the right of the accused to be judged by their peers, and registered nurses who in the future may be required to account for their actions to their Governing Body will have the assurance that working nurses will help to compose the Council which will consider questions of discipline. We may hope, however, that the disciplinary duties of the Councils will not be extensive.

In regard to a Central Examination the one thing of all others which nurses are longing for is a Central Examination for which all can enter on equal terms.

The question of finance is one of extreme importance, upon which the success or the reverse of the Council's work largely depends, and one of the most important duties of the first Nursing Councils will be to define a system of sound finance. This will be no easy matter for those who have had experience in organising and maintaining a Register of Nurses, estimated, before the war, that a two guinea fee would be required. The fee payable for registration in the case of existing nurses has been fixed at not more than £1 1s., which has only the purchasable value of 10s. 6d. at pre-war rates. The finances of the Councils will therefore need to be very carefully administered if the business is to be efficiently conducted, and their officials adequately paid. We have no doubt, however, that the Councils will address themselves to this problem during the all-important period of framing the rules, and endeavour to find a satisfactory *modus vivendi*.

## OUR PRIZE COMPETITION.

WHAT IS MEANT BY (a) CROSS INFECTION, AND (b) CONCURRENT DOUBLE INFECTION? HOW MAY CROSS INFECTION ARISE? WHAT MEASURES ARE ADOPTED IN HOSPITAL FOR ITS PREVENTION? GIVE SOME EXAMPLES OF CONCURRENT DOUBLE INFECTION.

We have pleasure in awarding the prize this week to Miss Margaret A. Young, St. Bartholomew's Hospital, Rochester, Kent.

### PRIZE PAPER.

The term "Cross Infection" is applied when an infection foreign to the general infection of the ward spreads to another patient, *e.g.*, into a ward of Diphtheria is admitted a case of Diphtheria with Parotitis; if precautions are not immediately taken it is quite possible and highly probable that a convalescent patient, up walking, may come in contact with the new admission and develop Parotitis. Also a case in point—a case of Diphtheria is admitted, and perhaps owing to incomplete history being obtained, child is only in convalescent stage of Chicken-pox, very few visible signs being present. This, of course, could quickly spread either by direct contact with patient or by transference indirectly through feeding articles, treatment utensils, bath blankets, nurses' hands, &c. Lastly, a case before admission may have been in contact with Scarlet Fever, and the full incubation period, not having expired, development of the second infection may occur a few days after admission, meanwhile the infection has spread to the other patients. All these examples show how Cross Infection can be beyond the control of the nursing staff. To cite a case of "Prevention of Cross Infection":—A patient already in develops Chicken-pox. He is at once put on "Barrier," moved to a "Verandah Cell," or moved to "Bed Isolation Ward."

1. "Barrier" indicates that the case is nursed singly, though in a general ward, and the patient has everything for his own use—feeding and treatment utensils, bedpan and bath blanket. At the foot of the bed two upright stands, with a red cord stretched between, draws attention to the fact that all within that zone is danger. At the head of the bed are medical officers' and nurses' gowns, and on the chart board are hung or placed thermometer and pulsometer. At foot of bed is placed a tripod with hand basin for patient's use, soap dish, jug for treatment lotions, and a basin of disinfectant in which the nurse or medical officer attending patient carbolises hands before and after entering and leaving the Barrier. If these rules are strictly adhered to

there is no chance of cross infection, and should such occur grave censure is the lot of the nurse.

2. Verandah Cells are a still more sure manner of controlling infections such as Chicken-pox and Measles. The wards, completely divided from each other, open off one side of a verandah, thus ensuring a separate air-supply to all wards, and whereas the Barrier usually nurses one case, the Verandah accommodates a number, according to size, such as four, six or eight per ward.

3. Bed Isolation Ward is a study in itself, and it will only be possible to give it in abbreviated form. Usually the beds are fifteen feet apart. A gown hangs by each bed, and is worn when any attendance on the patient is necessary. Each patient has a bath blanket and douche for his own use, also thermometer and pulsometer, otherwise a common stock of feeding and treatment utensils, and all are boiled after each time of using. Bedpans, urinals, &c., are boiled after use. To minimise work all patients are blanket-bathed, otherwise the common bath would require carbolising between every two baths. A fountain stands in the middle of the ward, at which scrubbing up is done immediately after leaving a bed, also lotion for carbolising the hands.

The Medical Officer in charge of the ward arranges the beds in order of least infection, and they are nursed on the same principle, Diphtheria ranks first, Scarlet Fever second, the other infections grading to Measles and Chicken-pox last.

b. Concurrent Double Infection.—Two infections running together, *e.g.*, Laryngeal Diphtheria and Measles, a combination often met with in spring; Scarlet Fever and Parotitis, occurring in autumn; Scarlet Fever and Vincent's Angina. In these cases it is necessary to "barrier" the cases at once.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss P. Thompson, Miss M. James, Miss T. Andrews, Miss B. Evans.

Miss James points out that catarrh of the Eustachian tube, occurring in Scarlet Fever, and occasionally a muco-purulent catarrh of the vagina may be a source of infection.

### QUESTION FOR NEXT WEEK.

State (1) How to organise an eight-hours' day for nurses in hospitals; (2) How to organise a forty-eight hours' week for nurses. State (a) the number of beds in ward, (b) the number of nurses required for duty in ward. State hours on and off duty.



## NURSING ECHOES.

For numerous kind telegrams and letters on her appointment as a member of the General Nursing Council, Mrs. Bedford Fenwick desires to "return thanks." It is now nearly forty years since she first dreamed that such a governing body, authorised by the State, might be formed for the benefit of nurses and the community, and to have lived to see "the Day" is indeed most gratifying. Now the real work of the organisation of the Nursing Profession will begin, and it is an immense privilege to be called to take part in it. We are indeed thankful that many of those who promoted legislation, and who have borne the burden and heat of the day in advancing it, have been invited to help to administer the Act. This will require wide knowledge of nursing conditions and education at home and abroad—and unlimited time and devotion to their improvement and evolution. It is going to be a colossal task.

The new President of the Irish Nurses' Association, Miss E. Hezlett, is a highly popular lady. She was trained at the Richmond Whitworth and Hardwicke Hospitals, Dublin, where she was promoted Ward Sister, and successively held the positions of Home Sister for two years, Assistant Matron for six years, and Matron since 1918. Miss Hezlett, as one of the younger generation of matrons, will have the pleasure of helping to organise nursing education as recommended by the Irish General

Nursing Council, and to prepare pupils for their State examination to qualify for registration. Nurses trained at "the Richmond" have always attained a high standard, but there is no standing still in these progressive days, and Irish nurses will eagerly avail themselves, we feel sure, of systematised teaching methods calculated to improve their work and value to the sick.



MISS E. HEZLETT,  
PRESIDENT, IRISH NURSES' ASSOCIATION.

N.S.W., and amongst her awards for war service are the Royal Red Cross, the Order of St. John of Jerusalem 1st Class, the Order of Elizabeth 1st Class (Belgium), the Order of Gratitude in Gold (France), besides the 1914 Star, the British War and Victory medals. She has also been mentioned in dispatches.

The *Times* reports, from Geneva, that the League of Red Cross Societies has granted ten public health nursing scholarships of £200 each and travelling expenses, to be offered to its member societies of the war-stricken countries or those who wish to improve their organisation.

These courses begin in October at King's College for Women, London University, the scholars undertaking to initiate and develop public health nursing in their home countries.

Miss Nora Fletcher, R.R.C., Matron-in-Chief of the British Red Cross, France and Belgium, has been created a C.B.E., as we reported. Miss Fletcher hails from Sydney,

The *Leicester Mail* is sending collecting

sheets into the Leicester factories appealing for single shillings in support of the *Daily Telegraph* appeal for indigent nurses and the College of Nursing, Ltd. What are the members of the Royal Infirmary Leicester Nurses' League doing to counteract this humiliation? Surely something.

We are glad to learn that the Dutch nurses are hopeful that a Nurses' Registration Act will soon become law in Holland, and that copies of the English Acts, supplied to their National Council by the National Council of Trained Nurses of Great Britain and Ireland, have been of great assistance to them. The late Mrs. Hampton Robb, of honoured memory, was a strong believer in a uniform international standard of nursing; and by consultation, through national organisations of nurses, as Acts of Parliament are passed in the various countries, through the Governing Bodies set up it will be possible to define a curriculum of nursing education common to all countries where trained nursing is organised.

Before very long, no doubt, the General Nursing Council will be in the throes of debate over the question of a registered nurse's uniform. We know that the Private Nursing World is deeply interested in the subject, and, indeed, well they may be, to judge from the caricatures of nursing costume we daily meet in the street. We recently disqualified an applicant for R.N.S. because she wore petticoats up to her knees, and what may be termed "spaniel's ears," curliwigs of hair, dabbed on to her cheeks. We told her a nurse should look like a nurse—that is, a tidy, modest person—if she wished to inspire confidence, even with silly people. This she evidently thought old-fashioned twaddle, and indignantly withdrew.

The question of a registered uniform is also exercising our colleagues at the Antipodes, and "Sartor" writes in *Una* to suggest reform in same:—

"Since the registration of nurses' uniform is under discussion, I think it a suitable time to suggest reform in same. Something more simple than the present cap, belt, cuffs, apron, collar would be welcomed by many. The laundering in country hospitals, both private and public, also in private nursing, is often a source of much trouble, so much so that I have seen articles of uniform worn much longer than could be considered hygienic. I have heard many nurses condemn the handkerchief cap as worn at present. In my opinion it should not be worn by anyone doing actual nursing. I would suggest a gown

similar to the one usually worn in the operating room, and a cap that covers the hair completely. The gown to be left behind when the nurse goes to her meals, a presentable washing dress to be worn underneath, the sleeves of dress to be turned back and pinned till the nurse goes off duty; cap also to be left when off duty. Uniform as described could be changed more frequently without much strain on the laundry."

## HONOURS FOR NURSES.

His Majesty the King bestowed the following decorations at Buckingham Palace on Thursday, April 22nd:—

### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Annie Wilson.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Mrs. Ethel McEwan, Miss Jean Orr, and Miss Jane Trotter.

*Territorial Force Nursing Service.*—Miss Elizabeth Kerr.

### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Gladys Parry, Queen Alexandra's Imperial Military Nursing Service Reserve; Miss Elizabeth Beet, Mrs. Jane Howe, Miss Ella MacFadden, Miss Rosina MacMorland, Miss Edith Porter, Miss Annie Ridley, and Miss Ida Tuxford.

*Territorial Force Nursing Service.*—Miss Beatrice Blakeley, Miss Katie Cooper, Miss Winifred Hooper, Miss Battiscombe Mustard, and Miss Frances Richardson.

*Civil Nursing Service.*—Miss Annie Clapham, Miss Dora Harries, and Miss Alice Scruton.

*British Red Cross Society.*—Miss Alice Burfield, Miss Mabel Pepper, Miss Nellie Pickersgill, and Miss Lalla Poole.

*Civil and War Hospitals.*—Miss Annie Dawson and Miss Ruth Thompson.

*Voluntary Aid Detachment.*—Mrs. Nancy Hick and Miss Dorothea Sutherland of Forse.

Queen Alexandra received at Marlborough House the members of the Military and Civil Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service) was also received by Her Majesty.

At the eighth annual conference of the National Health Convention of the Association of Approved Societies, held in London on April 10th, it was resolved that the time had come when the "panel system" and all public health services should be substituted by a comprehensive State medical service, securing to the whole population, at the national expense, the most efficient and complete service that medical, surgical, and dental science could offer.

## GENERAL NURSING COUNCIL FOR ENGLAND AND WALES.

### APPOINTMENT OF MEMBERS.

The Ministry of Health announces that the following persons have been appointed to form the first General Nursing Council under the Nurses Registration Act of 1919.

#### APPOINTED BY THE PRIVY COUNCIL.

Lady Hobhouse.

Mr. J. C. Priestley, K.C.

#### APPOINTED BY THE BOARD OF EDUCATION.

Hon. Mrs. Eustace Hills.

Miss Batty Tuke, Bedford College.

#### APPOINTED BY THE MINISTER OF HEALTH.

The Rev. G. B. Cronshaw, Radcliffe Infirmary, Oxford.

Dr. E. W. Goodall, M.D.

Dr. A. Bostock Hill, M.D.

Dr. Bedford Pierce, M.D.

Sir T. Jenner Verrall, M.D.

#### NURSES APPOINTED BY THE MINISTER OF HEALTH.

Miss A. Cattell, Private practice.

Mr. T. Christian, Nurse, Banstead Mental Hospital.

Miss A. Coulton, Matron East London Hospital for Children.

Miss R. Cox Davies, R.R.C., Matron Royal Free Hospital.

Miss A. Dowbiggin, C.B.E., R.R.C., Matron Edmonton Poor Law Infirmary.

Mrs. Bedford Fenwick, formerly Matron St. Bartholomew's Hospital.

Miss A. Lloyd Still, C.B.E., R.R.C., Matron St. Thomas' Hospital.

Miss M. MacCallum, Professional Union of Trained Nurses.

Miss I. Macdonald, Royal British Nurses' Association.

Miss A. M. Peterkin, General Superintendent Queen Victoria's Jubilee Institute for Nurses.

Miss E. Smith, Welsh Superintendent, Queen Victoria's Jubilee Institute for Nurses.

Miss M. E. Sparshott, C.B.E., R.R.C., Matron, Royal Infirmary, Manchester.

Miss E. C. Swiss, Health Visitor for Willesden.

Miss S. A. Villiers, Matron, South Western Fever Hospital, Stockwell.

Miss C. Worsley, Matron, Infirmary for Children, Liverpool.

Miss C. S. Yapp, Matron, Ashton-under-Lyne, Poor Law Infirmary.

Mr. Priestley has been appointed the Chairman of the Council.

The following special branches of nursing are represented on the Council by experts:—General (Voluntary Hospitals and Poor Law Infirmarys), Maternity, Children, Fever, Mental, Military, District, Public Health and Private. The Minister of Health said "he would do his best." We think he has done well.

## WHO'S WHO ON THE GENERAL NURSING COUNCIL.

**Mr. J. C. Priestley, K.C.**, Appointed Chairman by Minister of Health, second son of the late Sir William Overend Priestley, M.D., M.P., Edinburgh and St. Andrews Universities. Educated at Marlborough and Pembroke College, Cambridge. Called to the Bar in 1888. Appointed a Justice of the Peace for Hertfordshire, 1906.

**Lady Hobhouse**, wife of the Right Hon. Sir Charles Hobhouse, Bart. Has taken much interest in the provision of nursing for the sick poor in the rural districts of Wiltshire, and has been Treasurer, Secretary, and Chairman of the Wiltshire Rural Nursing Association. Lady Hobhouse (then Mrs. Charles Hobhouse) gave evidence before the Select Committee of the House of Commons on Registration of Nurses in 1905.

**Hon. Mrs. Eustace Hills**, an active worker in connection with Child Welfare and Day Nurseries. Chairman of the Council, National Society of Day Nurseries.

**Miss Margaret Janson Tuke, M.A.**, Principal of Bedford College for Women, London, Associate of Newnham College, Cambridge. Mediaeval and Modern Languages Tripos, Cambridge, June, 1888. Member of the Senate of the University of London, 1911.

**The Rev. G. B. Cronshaw**, Chairman and Treasurer, Radcliffe Infirmary and County Hospital, Oxford.

**Sir Thomas Jenner Verrall, M.R.C.S.Eng.**, Consulting Surgeon, Sussex County Hospital. Direct Representative General Medical Council. Member British Medical Association. Ex-Chairman Representative Meetings, Ex-Chairman Insurance Acts Committee, and Chairman Medico-Political Committee. Chairman, Central Medical War Committee, and Member of all B.M.A. Committees; late Member Advisory Committee under Insurance Acts Committee. Delegate of British Medical Association on the Central Committee for the State Registration of Nurses.

**Dr. E. W. Goodall, O.B.E., M.D.** London Gold Medal and Scholar in Forensic Medicine, Medical Superintendent North Western Hospital (M.A.B.), Hampstead; Fellow Royal Society of Medicine and President Epidemiological Section; Orator, Hunterian Society, 1913; Member British Medical Association; went in 1915 to Dunkirk to open Queen Alexandra's Hospital for typhoid, and later to Nevers to an English Hospital for Wounded. In 1917 received a commission in the Army as Temporary Lieut.-Colonel R.A.M.C.; Officer-in-Charge Grove Military Hospital, Tooting, for two and a-half years. In 1919, in connection with the Friends Emergency Committee, took a Unit to Poland to inaugurate its work in the typhus epidemic under the Ministry of Public Health in that country. Author (with the late

Dr. Washbourn) of "A Manual of Infectious Diseases." Hon. Medical Secretary, Central Committee for the State Registration of Nurses, 1910, to date.

**Dr. A. Bostock Hill, M.D.**, Medical Officer of Health for Warwickshire. Emeritus Professor of Chemistry, Queen's College, Birmingham. Professor of Hygiene and Public Health, University of Birmingham, Social Science Diploma, University of London. President Association County Medical Officers of Health. President State Medical Section, B.M.A., 1911. Late Examiner Public Health and Forensic Medicine, University of Bristol, Lecturer on Toxicology, University of Birmingham. Fellow (Member Council and Examiner) Royal Sanitary Institute. Author of "The Health Visitor from the County Council Point of View," "Evolution of a County Health Department," &c.

**Dr. Bedford Pierce**, Medical Superintendent, the Retreat, York (Mental Hospital). President Medico-Psychological Association. M.D.Lond. (First-Class Honours in Medicine and Forensic Medicine) 1888, F.R.C.P., 1905. Murchison Scholar in Clinical Medicine R.C.P., London, 1890. Sen. Open Scholarship in Natural Science, 1884. Brackenbury Medical Scholarship and Lawrence Scholarship, 1889, St. Bart's Hospital. Fellow Royal Society of Medicine. Mem. Associé de Soc. Med. Psychol. de Paris. Lecturer Mental Disorders, Leeds University. Author of various books dealing with mental subjects.

#### GENERAL NURSING.

**Mrs. Bedford Fenwick** (née ETHEL GORDON MANSON). *Professional Career*: Paying Probationer, Children's Hospital, Nottingham, 1878, and Royal Infirmary, Manchester, 1879. Sister, London Hospital, 1880. Matron and Superintendent of Nursing, St. Bartholomew's Hospital, London, 1881-1887 (initiated the three years' term of training; award of marks by Matron for practical nursing efficiency in examinations; and the Gold Medal or Nurse first in pass list). Directress, Gordon House Home Hospital, 1889 to 1896. Hon. Superintendent, Registered Nurses' Society, 1893 to date.

*Professional Organisation*: Initiator and first member British Nurses' Association (to promote Registration of Trained Nurses), 1887. Member, Executive Committee and General Council. Helped to compile the first Register of Trained Nurses, issued by the Royal British Nurses' Association, 1891. One of the Signatories and mentioned in Incorporation Clause of the Royal Charter, Royal British Nurses' Association, 1893. Founder (and President), Society for the State Registration of Trained Nurses, 1902. Drafted first Bill for the State Registration of Nurses introduced into House of Commons, 1904. Passed House of Lords, 1908. Hon. Nurse Secretary, Central Committee for State Registration of Nurses (a federation of the trained nurses' organisations in England, Scotland and Ireland, and the British Medical Association). Conjoint

Bill introduced into House of Commons, 1910. Introduced House of Commons as Private Members' Bill and passed Second Reading, 1919. Basic principles incorporated into Government Bill, 1919. Received King's Assent 23rd Dec., 1919. Founder and Hon. President of the International Council of Nurses, 1899. Met Buffalo, 1901; Berlin, 1904; Paris, 1907; London, 1909; Cologne, 1912. Founder and President National Council of Nurses of Great Britain and Ireland.

Travelled in support of Nursing Education and Organisation. in United States of America, Canada, France, Germany, Holland, Belgium, and Denmark.

Hon. Member (only foreign member), National League of Nursing Education, U.S.A. Hon. Member American Nurses' Association.

Hon. Member, Trained Nurses' Association of India.

*Professional Services*.—President Nursing Section, British Royal Commission, Chicago Exhibition, 1893. Awarded 2 Medals and Diplomas for "excellence of Scientific Exhibits."

Hon. Secretary and Superintendent of Nursing Department, National Fund for the Greek Wounded, Græco-Turkish War (hospitals at Piræus, Chalcis, Patras). Inspector of Nursing by request of Crown Princess of Greece of the Ecole Militaire Hospital, Athens 1897. Commemorative Medal and Diploma of the Greek Red Cross, 1899.

Member of Grand Council and Executive Committee, Territorial Force Nursing Service for the City and County of London, 1909-1911, and 1913-1915.

Hon. Treasurer and Superintendent French Flag Nursing Corps, under authority of French Government and *Comité Britannique Croix Rouge Française*, 1914-1919.

Hon. Editor THE BRITISH JOURNAL OF NURSING, 1893 to date. Policy: State Registration of Trained Nurses (the organisation of the Profession of Nursing by State Authority), Efficient Nursing Education, Just Economic Conditions, and Self-Government for Nurses.

Literary contributions on Nursing Education and Organisation in professional and lay Press at home and abroad.

Result of Registration propaganda, upwards of 50 Acts for the Registration of Nurses are in force throughout the world.

**Miss Alicia Lloyd-Still, C.B.E., R.R.C.**, Matron, and Superintendent of the Nightingale Training School for Nurses, St. Thomas' Hospital, London, S.E.1. Trained in the Nightingale Training School, St. Thomas' Hospital.

*Professional Career*: Sister "Charity" Ward, St. Thomas' Hospital, Sister in Charge, St. Thomas' Home for Private Patients, Matron, Hospital for Consumption, Brompton Road, London. Matron, Middlesex Hospital, London. In August, 1913, Miss Lloyd-Still returned to St. Thomas' Hospital as Matron of the Hospital, and Superintendent of the Nightingale Training School.

Principal Matron, No. 5, General Hospital, T.F.N.S., Member Army Nursing Board, Queen Alexandra's Imperial Military Nursing Service.

*Professional Organisation*: Member of Council College of Nursing, Ltd., 1916 to date.

**Miss Rachel Annie Cox Davies, R.R.C.**, Matron, Royal Free Hospital, London. Cert. Monmouthshire County Infirmary, 1892. Cert. and Gold Medal, St. Bartholomew's Hospital, 1895.

*Professional Career*: Night Superintendent, Ward Sister and Acting Home Sister and Assistant Matron, St. Bartholomew's Hospital. Served as Nursing Sister, Army Nursing Service Reserve, for 15 months, South Africa, 1900. Matron, New Hospital for Women, London, 1902-1905. Matron, Royal Free Hospital, London, 1905 to date. Principal Matron, No. 1 (City of London) General Hospital, T.F.N.S., 1910. Member of Advisory Council, Territorial Force Nursing Service, Member Nursing Board, Queen Alexandra's Imperial Military Nursing Service.

*Professional Organisation*: Past President, League of St. Bartholomew's Hospital Nurses, President, League of Royal Free Hospital Nurses, Member of Council, College of Nursing, Ltd., 1916 to date.

**Miss Margaret Elwin Sparshott, C.B.E., R.R.C.**, Lady Superintendent, Royal Infirmary, Manchester. Cert. General Hospital, Nottingham, 1899.

*Professional Career*: Night Superintendent, General Hospital, Birmingham, Matron, Grimsby and District Hospital, Lady Superintendent, Royal Infirmary, Derby, Lady Superintendent, Royal Infirmary, Manchester, Principal Matron, Second Western General Hospital, T.F.N.S., Manchester.

*Professional Organisation*: Member of Council, College of Nursing, Ltd., 1916 to date.

#### POOR LAW INFIRMARIES.

**Miss A. Dowbiggin, C.B.E., R.R.C.**, Matron, Edmonton Union Infirmary. Cert. Leeds General Infirmary, 1899.

*Professional Career*: Charge Nurse, Metropolitan Asylums Board, Theatre Sister, Royal Portsmouth Hospital, Head Sister, Moseley Hall Convalescent Hospital, Assistant Matron, Shoreditch Infirmary, Matron, Southampton Union Infirmary, 5½ years, Matron, Edmonton Union Infirmary, March, 1910, to date. Organised the Nurse Training Schools in both Institutions.

*Professional Organisation*: Member of the Matrons' Council of Great Britain and Ireland. Member of Executive, National Union of Trained Nurses.

**Miss C. Seymour Yapp**, Matron, Ashton-under-Lyne Poor-Law Infirmary. Cert. Aston Union Infirmary under the Birmingham Board of Guardians.

*Professional Career*: After holding subordinate positions and obtaining special experience in the nursing of sick children, she was successively Infant Health Visitor at St. Helen's, Superintendent Nurse at York, West Hartlepool, and Tyne-

mouth Poor-Law Infirmary, and Matron of the Ashton-under-Lyne Poor Law Infirmary (Lake Hospital) since 1914. Author of "Modern Medical and Surgical Nursing for Probationers," "Practical Surgical Nursing for Probationers," and "Children's Nursing."

#### CHILDREN'S NURSING.

**Miss Agnes Mary Coulton**, Lady Superintendent, East London Hospital for Children, Shadwell, London. Cert., Children's Hospital, Liverpool; three years' training, 1907. Cert., Guy's Hospital, London, 1911.

*Professional Career*: Ward Sister, Children's Hospital, Liverpool, 1911-1912; Surgical Night Superintendent, Sister-in-Charge of Outpatient Department, and Assistant Matron, Guy's Hospital, 1912. Lady Superintendent, East London Hospital for Children, 1917.

**Miss Constance Worsley**, Matron, Infirmary for Children, Myrtle Street, Liverpool. Cert. Addenbrooke's Hospital, Cambridge, 1899.

*Professional Career*: Ward Sister, Night Sister, Theatre Sister, and Assistant Matron, Manchester. Children's Hospital, Pendlebury. Appointed Lady Superintendent and Matron, Infirmary for Children, Myrtle Street, Liverpool, in 1917.

#### FEVER NURSING.

**Miss Susan Alice Villiers**, Matron, South Western Hospital, Stockwell, M.A.B. Cert. St. Bartholomew's Hospital, London, 1895.

*Professional Career*: Entered service of M.A.B. as Staff Nurse, 1895-1896. Night Superintendent, South-Eastern Hospital, New Cross, 1896-1899. Assistant Matron, Brook Hospital, Shooter's Hill, 1889-1901. Matron Fountain Hospital, Tooting, S.W., 1901-1909. Matron, Park Hospital, Hither Green, 1909-1913. Matron, South-Western Hospital, Stockwell, 1913 to date.

*Professional Organisation*: Treasurer and Vice-President Matrons' Council of Great Britain and Ireland. Member of Executive and Council, Royal British Nurses' Association. Member of Executive, National Union of Trained Nurses. Delegate, Fever Nurses' Association, Central Committee for State Registration of Nurses.

#### DISTRICT NURSING.

**Miss Annie McWillie Peterkin**, General Superintendent, Queen Victoria's Jubilee Institute, Cert., Chalmers Hospital, Edinburgh, 1892.

*Professional Career*: District Training, Metropolitan Nursing Association, 1893. Enrolled as Queen's Nurse, 1894, and has held successively the posts of Superintendent, Birmingham, 1898, Inspector, Eastern Counties, 1904, Inspector, Lancashire and Cheshire, 1906, Acting General Superintendent temporarily in 1908 and 1910. Superintendent for Ireland, 1912, Scotland, 1913, and General Superintendent, 1917. Awarded Gold Badge of Q.V.J.I. for long and distinguished service. Certified Midwife.

*Professional Organisation*: Member of Council, College of Nursing, Ltd.

**Miss Ellinor Smith**, Superintendent for Wales, Queen Victoria's Jubilee Institute for Nurses. Cert. Sunderland General Infirmary.

*Professional Career*: Charge Nurse, and Night Superintendent, Sunderland General Infirmary; trained as Queen's Nurse at Edinburgh, and worked as such in Scotland; temporary and emergency Nurse, assisting with correspondence and organising work, Notts. Nursing Federation. Appointed County Superintendent on its affiliation with the Q.V.J.I. County Superintendent for Somerset, and Inspector of Midwives under the Somerset County Council. Superintendent for Wales and Inspector for Wales.

#### PUBLIC HEALTH.

**Miss Isabel Macdonald**, Secretary, Royal British Nurses' Association. Cert. Royal Infirmary, Edinburgh, 1903.

*Professional Career*: Lecturer for the County Committees of Fife and Haddington, the County Councils of Stirling and Kinross, the Carnegie Dunfermline Trust, and to the Scottish National Exhibition, 1908. Cert. Health Visitor, Cert. Hygiene, and Medallist, Royal Sanitary Institute, Fellow Institute of Hygiene, Diplomée, R.B.N.A. Lecturer to the Royal Sanitary Institute and to the Institute of Hygiene, Prize Essayist, Royal Sanitary Institute.

*Professional Organisation*: Secretary, Royal British Nurses' Association, 1909. Delegate, R.B.N.A., on Central Committee for the State Registration of Nurses.

Author of "Home Nursing, with Notes on the Preservation of Health," &c.

**Miss Emily Constance Swiss**, Health Visitor, Public Health Service, Willesden. Cert. Royal Infirmary, Sheffield, 1906.

*Professional Career*: Theatre Sister, Royal Infirmary, Sheffield. Nursing Sister, British Seamen's Hospital, Constantinople. Senior Nursing Sister, and subsequently Lady Superintendent of Nursing, Medical College Hospitals, Calcutta (six years). This is one of the largest Government General Hospitals in India, and a training school for nurses and midwives. Certificated Health Visitor, holds a certificate for Maternity and Child Welfare, is a certified midwife, and in 1916 received the Kaisar-i-Hind Medal for Public Service in India.

#### PRIVATE NURSING.

**Miss Alice Cattell**, cert. St. George's Hospital, London, W., 1891.

*Professional Career*: Member for ten years London Association of Nurses. Engaged in daily visiting nursing. Cert., Massage.

*Professional Organisation*: Member Royal British Nurses' Association, 1893. Is a member of its Executive Committee, General Council and Registration Board.

**Miss Maude MacCallum**, cert. Adelaide Hospital, Dublin, 1899.

*Professional Career*: Having successfully passed examinations at Trinity College, Dublin, and the Royal University, Ireland, entered the Adelaide Hospital, Dublin, as a probationer, where she obtained a three-year certificate for Medical, Surgical, and Fever Nursing, 1899, and also received an Honour Certificate certifying that she had passed the final Examination with Honours. On leaving the Hospital, joined the Nurses' Co-operation (now at 22, Langham Street, London, W.), and spent a good deal of time abroad, gaining experience in both French and Swiss Cliniques. On the outbreak of war, she worked for some time in a French Military Hospital, attached to the 10th Army Corps, and afterwards as Sister-in-Charge of a small Hospital auxiliary to the 2nd London General Hospital. Later she joined the Q.A.I.M.N.S.R. as a Charge Sister, and was demobilised in 1919.

*Professional Organisation*: Miss MacCallum inaugurated and is the Hon. Secretary of the Professional Union of Trained Nurses (registered under the Trades Union Act).

#### MENTAL NURSING.

**Mr. T. Christian**, cert. Medico-Psychological Association, 1903. Male Charge Nurse, Banstead Mental Hospital, Sutton, Surrey. Three years' training Banstead Mental Hospital.

*Professional Career*: Twenty years in the service of the London County Council in the above institution. Nominated by the Asylum Workers' Union, which includes 16,000 members.

### GENERAL NURSING COUNCIL FOR SCOTLAND.

The first meeting of the General Nursing Council for Scotland has been convened for Monday, May 10th, at 11.45 a.m., at the Scottish Board of Health, Edinburgh. It will be an historic occasion.

We hope before long to chronicle the fact that the General Nursing Council for England and Wales has also met.

### PRESENTATION TO MRS. BEDFORD FENWICK.

A Deputation of Matrons and Nurses will be received by Mrs. Bedford Fenwick at 20, Upper Wimpole Street, on Saturday, May 8th, when they will present her with an illuminated Address of Thanks for her many years' untiring work in support of the Nurses' Registration Cause, which has helped so materially to place the Profession of Nursing on a legal basis.

The presentation will be made in the room in which the Pioneer Matrons met in 1887 to promote the campaign for the organisation of Nurses through State Registration, now happily accomplished.



## CENTRAL COMMITTEE FOR THE STATE REGISTRATION OF NURSES.

At the meeting of the above Committee, held by kind permission of the British Medical Association, in the Council Chamber, 429, Strand, on Saturday last, the Hon. Secretaries, Dr. E. W. Goodall and Mrs. Bedford Fenwick had the gratification of reporting that the object for which the Central Committee had been primarily formed had been attained, and that the General Nursing Councils as provided for under the schedules of the three Nurses' Registration Acts had been appointed.

Many members of the constituent societies which had helped to draft the Nurses' Registration Bills introduced into Parliament last Session (the basic principles of which had been incorporated in the Government Acts) had been appointed to serve on the various General Nursing Councils, amongst them the Hon. Nurse Secretary, the Hon. Medical Secretary, and Sir T. Jenner Verrall, member of the General Medical Council and of the British Medical Association, who had on many occasions so ably conducted the meetings of the Central Committee.

A resolution was adopted agreeing to send the hearty congratulations of the Committee to the members of each constituent Society who had accepted office on the Nursing Councils constituted under the Acts, to thank them for their consistent and loyal services to the State Registration movement, and to wish them success in their future labours for the benefit of the nursing profession and the community.

A warm vote of thanks was also accorded to the British Medical Association for its help and support in furthering the organisation of the Nursing Profession by State Authority; support which had been invaluable in inspiring Parliament with confidence in the passing of the Nurses' Registration Acts.

## THE NATIONAL UNION OF TRAINED NURSES.

The Annual Council Meeting of the National Union of Trained Nurses is to be held on Saturday, May 1st, at 46, Marsham Street, S.W.; and at five o'clock there will be a reception to which members and their friends are cordially invited, tickets for tea being obtainable at 8d. each.

These Reunions are always most pleasant and friendly affairs, and this year the members will have special cause for rejoicing that the Acts for the State Registration of Nurses, which the Union has co-operated with the Central Committee to secure, are now on the Statute Book, and that two of the members of their Executive, Miss S. A. Villiers and Miss A. Dowbiggin, have been appointed by the Minister of Health on the First General Nursing Council.

## ARMY NURSES' PAY INCREASED.

It is officially announced that revised rates of pay have been approved for temporary nurses (Q.A.I.M.N.S. Reserve, T.F.N.S., V.A.D. Nursing Members, and Special Military Probationers) continuing or commencing to serve after April 30th 1920. V.A.D. nursing members or special military probationers will receive £30 a year, rising by half-yearly increments of £2 10s. to £40. Q.A.I.M.N.S. (R.) or T.F.N.S. staff nurses will receive £63, rising by annual increments of £2 10s. to £68 a year; Sisters £77 10s., rising by annual increments of £5 to £92 10s.; Assistant Matrons initial and maximum rate, £120 10s.; Matrons, £120 10s. rising by annual increments of £10 to £195 10s. These rates include the extra remuneration (Army of Occupation bonus) granted on August 26th, 1919. Nurses receiving the revised rates must sign a contract to serve for either one or two years, if so long required. Nurses already drawing the additional pay of £20 a year granted in 1916 to nurses who undertook to serve for so long as required, will continue to draw it.

## NURSES MISSIONARY LEAGUE.

### SIXTEENTH ANNUAL CONFERENCE AND MEETING.

The sixteenth Annual Conference and Meeting of the Nurses' Missionary League will be held at University Hall, Gordon Square, W.C., on May 5th.

### PROGRAMME.

"The Building of the Kingdom of God on Earth."

*Morning Session, 10.15—12.30.*

*Chairman:* Mrs. Douglas Thornton.

Missionary Litany for Doctors and Nurses.

*Demonstration Study Circle:* led by Miss D. Harrower.

"The Building of the Kingdom": (1) In China. Miss E. V. Hope (Guy's and Hingwa); (2) In India. Mrs. Starr (Norfolk and Norwich, and Peshawar).

### INTERVAL.

"The Qualities Required in the Builders." Mrs. Thornton.

### INTERCESSION.

*Afternoon Conversazione, 2.30—5.*

*Hostesses:* Mrs. Bardsley, Miss Zoe Fairfield, Mrs. Sturge, Miss Watney, M.B.E. (St. Bart's and Uganda), Mrs. Weir, R.R.C. (St. Bart's and Korea).

*Addresses:* "A Matron's Work in China. Miss E. J. Haward (Guy's and Peking).

"Opportunities for Nurses in Uganda." Ernest N. Cooke, Esq., M.B., B.S., London (Mengo Hospital). Instrumental Music, Songs: Miss. P. Yelverton Dawson.

The afternoon affords special opportunities for getting to know members from other hospitals and Committee members.

*Evening Session, 7.30—9.30.*

*Chairman:* Col. H. Gordon Mackenzie, M.D., D.S.O.

OPENING HYMN AND PRAYER.

Adoption of Annual Report, and Election of Com-

mittee for 1919-20. A list of nominations for the Committee will be hung in the Hall during the day.

"All Sorts and Conditions of Builders." Miss F. Feare (Prince of Wales' General Hospital, Tottenham, and Jammalamadugu).

"God's Need of Builders with Him." The Rev. E. Shillito (author of "The Jesus of the Scars").

Bookstall, refreshments, photographs.

## APPOINTMENTS.

### MATRON.

**Hemlington Tuberculosis Sanatorium, Middlesbrough.**—Mrs. B. Gardner has been appointed Matron. She has held the positions of Charge Nurse at the Eston Sanatorium, Yorks, Matron of the Ovenstone Infectious Diseases Hospital, Pittenwee, N.B., and Matron and Charge Nurse at the City Hospital, North Liverpool.

### SISTER.

**Springfield Hospital, Bolton Road, Rochdale.**—Miss Mary Beard has been appointed Ward Sister. She was trained at the City of London Infirmary, and has been Staff Nurse at the Southampton Eye Hospital, and for five years Sister at the Memorial Hospital, Ludbiana, Punjab.

**County Hospital, York.**—Miss Florence Moxon has been appointed Sister. She was trained at the Royal Infirmary, Sheffield, and has held the position of Theatre Sister at the Royal Surrey Hospital, New Nurses' Hostel.

## PRESENTATION.

Miss Timbrell, Matron of the Lowestoft Hospital has been presented with a cheque and an illuminated address by the local residents of Lowestoft, Oulton Broad, and Pakefield, on her resigning the position to take up a London appointment. Miss Timbrell has been Matron of the Lowestoft Hospital for the last ten years, thus covering the period of the war, and considering the exposed situation of the hospital, and the frequent attacks by the enemy on that portion of the coast the position could have been no sinecure. From the beginning of the war it opened its doors to seamen, local troops, and later small convoys of wounded men from overseas. Miss Timbrell has had a varied career, including service on the Gold Coast and in Siam. Prior to the public presentation, Miss Timbrell was handed a farewell gift from the nursing staff at the Hospital.

## NEW NURSES' HOSTEL.

The Countess of Malmesbury has laid the foundation-stone of a hospital nurses' hostel at Boscombe, Bournemouth. The hostel, which is to provide accommodation for thirty nurses, and is in connection with the Royal Victoria and West Hants Hospital, will cost £14,000. Mr. Walter Child Clark has given the site.

## LECTURES TO NURSES.

A Course of free lectures to nurses and members of the allied professions, on "Venereal Diseases," will be given by Mr. Leonard Myer, F.R.C.S., at St. Paul's Hospital, 13A, Red Lion Square, Holborn, W.C., beginning on Friday, May 7th. We commend these lectures to the attention of nurses and midwives, comparatively few of whom have an opportunity of gaining an adequate knowledge on this subject during their training. Their thanks are due to Mr. Myer for arranging and delivering these lectures.

## PROFESSIONAL UNION OF TRAINED NURSES.

The P.U.T.N. held a public meeting for Nurses (the first since it was registered as a Trades Union) at King George's Hall, W.C., on April 24th.

Mrs. Paul was in the Chair.

The Chairman, in her opening speech, touched upon the work the Union had been engaged in since it started last January, and also gave an outline of what they proposed to accomplish in the near future, notably their plan for the provision and care in sickness.

She also announced that Miss Maude MacCallum, the Hon. Secretary, had had the honour of being appointed by the Minister of Health on to the first General Nursing Council set up under the Nurses' Registration Act.

Dr. Welply, Secretary of the Medico-Political Union, explained the origin of Trades Unions. At one time in England it was illegal for any body of persons to combine for any purpose. The Trades Union Act was passed to make it legal for persons to band together for the purpose of safeguarding and protecting their interests.

Miss Parsons, who has acted as Matron in both Civil and Military Hospitals, said she hoped the time would come when all the working staff in a hospital would have direct representation on the Council of that hospital. She thought it would do away with a good deal of friction and injustice. She mentioned a hospital she knew of where the probationers worked from 6.30 a.m. to 9 p.m., with two hours off. Again, the nurses in a great many hospitals were not properly fed, and their accommodation bad. She gave instances where Matrons protesting against the bad conditions of the Nurses, were asked to resign. She thought all Nurses' quarters should be inspected, and that a good deal of trouble was caused by people being on Hospital Boards who did not understand a Nurse's life.

Mr. Naylor agreed with Miss Parsons that all grades of workers should have representation on Hospital Committees, and this was necessary both for the good of the governors and the nurses. Public opinion was on the side of the nurses, but they must not leave their business in the hands of others no matter how interested they might be; the work must be done by the Nurses themselves, through their Union.

Miss Alderman said that the regulations for the training of Health Visitors issued by the Ministry of Health, required very close examination, and that it was safe to predict that had the Ministry been in office for two or three years they would not have been issued in their present form, and reinforced by actual experience of the working of their own health departments, the minimum qualification of three years' training in a general training school would have been laid down, with additional qualifications such as the Certificate of the Central Midwives Board, experience in a Children's Hospital, in tuberculosis nursing, &c.

People who advocated that girls of twenty should be sent round as Health Visitors showed such absolute ignorance of the nature of public health work that their opinion was valueless. If nurses in Public Health had been properly organised they could have opposed these regulations. They were pushed through because there was no opposition from the workers.

Mr. Sydney Paxton, a member of the Actors' Association, said we must defend our rights not in defiance, but in defence. We had to protect ourselves from injustices which seem all around us. He gave a graphic account of how members of his Union had been protected from breach of contract upon the part of the well-known and powerful film company (Messrs. Pathe Freres). He said nurses must be protected against massage establishments, and against women who wore their honourable cloak in the street for purposes of immorality; as actors had to fight against bogus actors, nurses must fight against bogus nurses.

#### NO STRIKE CLAUSE.

There was no discussion, but in reply to a question the Chairman stated that they had no strike clause in their Articles of Association, but they might advise members to apply the boycott.

#### THINGS DONE IN THE FIRST THREE MONTHS.

1. First member enrolled January 1st, 1920.
2. Registered under Trades Union Act March 1920.
3. Invited by Minister of Health to send names for consideration for appointment on First General Nursing Council.
4. Approached Minister of Labour *re* the inclusion of Nurses in the 48 Hours' Bill. Deputation received by Sir David Shackleton. Conference called of employers and employees forwarded a scheme and Memorandum to Minister of Labour before Easter.
5. Wrote to Lord Burnham, proprietor of the *Daily Telegraph*, asking him not to start charitable appeal for Nurses, and formed part of a deputation to the principal newspaper offices protesting against the "begging" scandal in the *Daily Telegraph*.
6. Had a question asked in the House of Commons *re* the Appeal, especially in reference to "Nurse Juliet."
7. A Branch of P.U.T.N. already formed in Scotland.
8. Have formed a Public Health Section, and have communicated with several authorities on the question of low salary.

#### TRUE TALE WITH A MORAL.

*College Member to Trades Union Nurse*: "We consider you have dragged the Nursing profession in the gutter."

*Trades Union Nurse*:—"And we consider that has been done by your "Nurse Juliet."

## LEGAL MATTERS.

### THE MENTAL NURSES' ASSOCIATION, LTD. v. MISS MARY DOWNIE.

A case of considerable interest to nurses was heard on Tuesday, April 20th, before His Honour Judge Bray in the Bloomsbury Court, Great Portland Street, W., involving some important points to nurses in private practice.

Miss Downie was sued by the Mental Nurses' Association, Ltd., for breach of agreement under a clause in her agreement which provided that if she left the Association she should not, until twelve months had expired, enter the service of anyone who had employed her in any capacity while working for it without paying its percentage for the continuance of the case. Mr. Duncan represented the plaintiffs, and Mr. Campbell-Lee the defendant nurse.

Miss Catherine McKinnon, Matron of the Association, supported this claim and said that the defendant was sent to a patient at the Royal Palace Hotel, Kensington, on December 15th, 1918. She tendered her resignation to the Association on September 11th, 1919, being still at the case. The Association had received £132 for the defendant's services and paid her £101. The Association was a Limited Liability Company, Mr. Robert Donaldson and Mr. Walshe, J.P., were two of the Directors.

Replying to Mr. Campbell-Lee she said that she sent Miss Downie an application form. She did not send the rules (contract) she was required to sign. They were not in the habit of sending the rules to applicants. She did not send a form of agreement or a letter explaining the Association. Nurses who applied from the Mental Hospital in Glasgow, where Miss Downie was trained, could learn what the rules were from other nurses there. The Association got the nurse to sign the rules (contract) when she came into the office.

Under Rule 13 she had the right as Matron to discharge a nurse at once without giving any reason.

When Miss Downie came from Scotland she had already been accepted; she signed the agreement after she came to London. Miss McKinnon could not remember whether she had ever personally discussed with her the terms under which she was going to serve. If the legal side of the present case were sustained Miss Downie would have to pay the Mental Nurses' Co-operation £32 a year as long as she remained with the patient if it was for 100 years. If she left for one year there was nothing to prevent her taking the case then.

Miss Emma Miriam, Secretary, supported Miss McKinnon's statements, and said the percentage charged to nurses by the Association was 23 to 25 per cent., or a quarter of the nurses' wage.

Mr. Donaldson, Manager of the Male Nurses' Temperance Co-operation, and a Director of the Mental Nurses' Association, said the directors' instructions were that every nurse should have the

agreement explained to her. The Matron had full power to discharge a nurse.

Mr. Campbell-Lee suggested that the Mental Nurses' Association, Ltd., was not an Association of Nurses, as its name indicated, but a Limited Liability Company run for profit, to exploit nurses.

Mr. Donaldson asserted, with some warmth, that he had never had either salary or dividend, and had put his whole savings into the Company.

The clause in the rules prohibiting a nurse from returning to a case to which she was sent by the Association for a year after she had left it without paying percentage was inserted in the rules to safeguard the Company.

Miss Jean Hastie, proprietor of the Mental Nurses' Co-operation, 49, Norfolk Square, W., said she took Miss Downie into her employment on November 1st. She paid the nurses their fees every four months, less 12 per cent. commission. She provided a home for the nurses between their cases, where they paid 25s. a week if they shared a room, or 30s. for a single bedroom. She could dismiss Miss Downie by giving her four weeks' notice. When Miss Downie came on to her staff, the lady whose ward she was nursing asked if she could continue with the case, and she did so. If she had known of the clause in Miss Downie's agreement with the Mental Nurses' Association, she would have advised her to leave it for a year.

Mr. Campbell, in his speech at the conclusion of the case, said that Miss Downie severed her connection with the first Association and went into the employment of Miss Hastie. Her relationship with Miss Hastie was as the relationship between master and servant. She paid Miss Hastie £1 1s. entrance fee and £1 1s. annual subscription.

The Judge inquired in whose service Miss Downie was. That of the lady who engaged her services or Miss Hastie.

Mr. Duncan said she was attending the ward of the lady who obtained her from the Mental Nurses' Association, and he submitted she was in her service. Her agreement with the Association prohibited her from serving "in any capacity" anyone to whom she had been introduced by the plaintiff Association for one year after severing her connection with it, without paying a percentage on her earnings (25 per cent.) to the Association. She might be nominally in the service of Miss Hastie, but he contended that Miss Hastie, who was proprietor of an Agency licensed by the London County Council might as well say that if a cook paid a commission to an agency which introduced her to a situation she was in the employment of that Agency.

The Mental Nurses' Association were the people who introduced Miss Downie to the patient, and under her signed agreement she had undertaken that if within a year she returned to the service of any person to whom she was introduced by the Mental Nurses' Association, she should pay them a percentage for the continuance of the case. He claimed that he had proved that the Association

had placed the nurse at the service of the lady by whom she was at present engaged, and that she was still serving her as a nurse, and so came under the terms of her agreement with the Mental Nurses' Association.

His Honour having heard the arguments of both sides, reserved judgment.

#### THE JUDGMENT.

This was given in the Bloomsbury County Court on Monday, April 26th, when the Judge delivered judgment for the defendant, who, however, was required to pay her own costs. Leave to appeal was allowed.

#### POINTS OF IMPORTANCE TO PRIVATE NURSES.

The first important point which arises in this case is that nurses should make an invariable rule of acquainting themselves with the regulations under which they will have to serve before accepting an engagement on the staff of an Association or Co-operation. It seems almost incredible that a nurse should come up to London from Glasgow under an agreement to join an Association without acquainting herself with the regulations and the legal contract she would be required to sign or knowing what commission on her earnings she would have to pay.

Secondly, putting aside for the moment the legal aspect, in our opinion, and in that of most honourable people, if a nurse severs her connection with a society which introduced her to a case, she is in duty bound to give up the case on leaving the society. Especially is this just when she is the member of a Co-operation, where loss on business injures her colleagues on the staff, and in mental nursing where a nurse might join a society for a few months, and take away with her a case to which she had been introduced which might last for a number of years, it is quite inexcusable. It is high time that nurses realized the necessity for honourable business dealing in this respect, and we fear the high percentage charged by the Association in question and the regulation prohibiting the abstraction of patients, may have resulted from a lack of appreciation upon the part of nurses that it is very unfair to take over patients and break contracts for their own personal benefit.

Neither should the proprietor of a nursing business take over a patient when engaging a nurse provided by another.

Well trained nurses should make careful enquiries before joining private nursing establishments. They should satisfy themselves that such businesses are conducted by professional nurses, and hesitate when asked to pay more than 10 per cent. on their fees.

#### FEVER NURSES' ASSOCIATION.

Members are asked to note that, after the Annual Meeting, which is to be held at Croydon Town Hall, on Saturday, May 8th, at 2.30 p.m., tea will be provided by the kindness of the Mayor and Corporation of Croydon at Croydon Fever Hospital.

## THE HOSPITAL WORLD.

Prince Albert paid a private visit to the Queen's Hospital for Children, Hackney Road, E., of which, he has recently become President, and was received by Colonel Lord William Cecil (the chairman), Dr. Porter Parkinson (senior physician), Mr. Joseph Meller (chairman of the House Committee), Miss Bushby (matron), and Mr. T. Glenton Kerr (the secretary).

The young Prince was shown everything of interest and impressed his entourage with his intelligent interest and charm.

Our Princes, as they come to man's estate, are impressed by their parents with a keen sense of *noblesse oblige*.

Sir William James Thomas was unanimously elected chairman of the Board of Management of the King Edward VII. Hospital, Cardiff, at the recent monthly meeting of the Board. Lady Thomas was formerly the Assistant Matron of the hospital.

The latest convert to payment by patients is the City of London Hospital for Diseases of the Chest, Victoria Park, which will now ask patients to pay "according to their means."

### MISS L. L. DOCK TO WRITE FIRST PART OF RED CROSS HISTORY.

We learn from the *American Journal of Nursing* that the story of the American Red Cross Nursing Service is to be recorded from the early days of its foundation to the present time as it faces towards its broad reconstruction programme.

That the eminent nursing historian, Miss Lavinia L. Dock has undertaken to write the first part of this history—the formative period, embracing the Civil and Spanish-American Wars, the formation of the Army Nurse Corps, and the Red Cross Reserve, as far as the declaration of war in 1914—secures accuracy and success for the undertaking.

Volume II will include the organisation and formation of the early units, the base hospitals, and the general nursing programme of the Red Cross following the participation of America in the war. Volume III will be concerned with the post-war activities of the service.

### A VENTURE IN INTERNATIONAL FRIENDSHIP.

The outcome of the work of the Society of Friends in France during the War is that a permanent maternity hospital is to be established at a cost of 1,000,000 francs. The Friends' Unit of the American Red Cross are financially responsible, and English Quakers are also participating in the work.

Two American and two English nurses will share the work, which has been described as "a venture in international friendship."

## SIR VICTOR HORSLEY.

(Concluded from page 248.)

BROTHERHOOD ADDRESSES.

Mr. Paget tells us that Sir Victor Horsley "desired to be in Parliament that he might be able to do more for democracy and for his profession; he would have worked hard on Committees, and he would have taken his place outside the House of Commons as a man elected to speak with authority to decisive audiences. If he had been returned in 1910 for the University of London; if he had steadily submitted himself to the limitations and the discipline of the House; if he had lived to now—there is no saying how high he might have risen in the world of politics."

As it was, the Market Harborough reverse came "when he was at the worst of his unpopularity. He was kept out of one thing after another. Opportunities were entrusted to lesser but safer men; and he was left, in the world of politics, to find his audiences for himself."

Some of us have heard him pleading eloquently for woman's suffrage from a cart in the Park, other opportunities were his Sunday afternoon addresses at "Brotherhood" meetings. "The Brotherhood now has a membership of half a million. Its motto is 'One is your Master, even Christ, and all ye are brethren.' Its intention 'To be non-sectarian, and to know no party politics.' Its ideal 'To win the people for Jesus Christ. To lead men and women into the Kingdom of God. To unite them in a brotherhood of Mutual Help. To encourage the study of social science. To enforce the obligations of Christian citizenship. To promote the unity of social service. To promote international brotherhood.' The Report for 1916 says of Horsley that he had been amongst the greatest of Brotherhood men—apostle of the war against disease and alcohol on our platforms, member of the London Speakers' League, 'a man to whom some of our leaders were looking as a potential National President.'"

The notes he has left of the addresses at Brotherhood meetings are an indication of his mind. Thus, "We live in an Empire where the sun never sets, and in slums where the sun never rises, . . . Montaigne's position, 'The honourable vocation is to work for the commonwealth, and the profit of the many.'"

"For Sir Victor Horsley," we read, "Christianity was Christian Ethics and Social Service; these he took and worked into the fabric of his life."

"There was in him," writes a well-known surgeon, "a hint of the archangel which I have never discovered in any other man, and that made one feel he could never be anything but young and strong." "It is," says Mr. Paget, "the exact phrase . . . when he came into a dull roomful of people there was an odd effect as if the lamps went up of their own accord."

"On a holiday his love of the country and of open air life inspired him to get and to give happi-

ness all round. If there be a genius of holidays it was in him. In the earlier years there was neither time nor money for more than a few days of tramping or of boating. In the later years he used to take a big country house with land to shoot over; and he and Lady Horsley were incessantly hospitable. There is a pleasant story of one guest saying to another: 'Why, the man's absolutely selfless.' And he was selfless not only in hospitality, but in his will to give up everything at a moment's notice, and travel three hundred miles to London, for nothing, to see a surgeon, a stranger to him, who needed his help."

His rule that no medical man should pay a fee to him was absolute. One writes: "On no occasion would he take any payment. 'Dog does not eat dog,' he said."

One doctor wrote of him, "One of the greatest men I have ever known, whose heart, I believe, was the greatest part of his greatness."

It is sad to read how, during the years before the war, his practice fell off miserably. Medical men who thought he had betrayed them over the Insurance Act, were unwilling to send patients to him, and sometimes invalids disliked his politics. He writes that a report is being industriously circulated that he is retiring from practice, and that his surgery is mediæval. Mr. Paget writes: "Under the unhappiness, illness, and overstrain of these years he would have broken down if it had not been for his home life. All of us saw the side that he faced the world with; but those of us who did not see the other side of him—the home life—did not know him. Indeed, it was perfect. It was the making of him, and the saving of him. Not that it was leisurely; it was incessantly strenuous; it drove ahead, every day and all day long, toward the attainment of a hundred purposes."

Of his position in his profession Mr. Paget strikes a certain note: "He is with Ambrose Paré, Lister, and Hunter; with them, not below them. Paré in practice was one of the greatest of all surgeons, but he had only such science as the age could give him. Lister is greatest of all the 'saints laïques' in the doctor's calendar, but he does not equal Horsley in range and imaginative insight. Hunter was magnificent, but he did not trouble himself over the welfare of the community; he was content with a rather selfish life."

"That, after all, was the distinctive keynote of Horsley's life and work—that he could not rest in all science and practice, but must also be in politics. We have lost a man who was always willing to set aside his own interests for the whole-hearted, full-blooded pursuit of an unpopular cause. We had been with him, followed him, or come into collision with him in the streets of life, always conscious of him, always saying there was nobody like him; and then of a sudden he was gone, and we were left standing on the old ways of individualism, honourable but inadventurous."

#### THE WAR.

It was tragic that in the first days of the war when his supreme surgical skill would have been

of untold value to hundreds of wounded at the front, he was "eating his heart out at home in enforced idleness." He wrote to Dr. Mary Sturge: "It is very difficult to work with any go or purpose when one is certain that one could really be of much more service elsewhere, viz., in the Belgian Base Hospitals. However, I am not going out in any of these fashionable and disreputable side-shows, I am glad to say."

Later he went to Wimereux, to the British Hospital in the Hotel Bellevue. Though the first half of April the work was slack "it was the unsatisfactory business of amateurism. These private hospitals are not wanted, though the beds are." Later he writes: "Fortunately I find all the Sisters here are first-rate people and all progressive, so when we are thoroughly sick of—and —'s arguments we can concoct plans for the future."

Then came Egypt, from whence he wrote: "I am not in any condition to write you amusing or interesting letters; all my energies are devoted to trying to get for our unfortunate men the merest elements of medical care."

Then Mesopotamia, and a spell of strenuous work, one day's illness, and the lamp of life was quenched.

"Always he had spent himself with superb extravagance; he was still at work the day before he died. It is not in the range of men's intellects to understand, through and through, a man's life. The real values of it are hid from them and are not clear even to him. This man, at any rate, played his life for all it was worth; there is nothing that he kept back from us, there is nothing that he feared."

M. B.

## TYPHUS-RIDDEN UKRAINE.

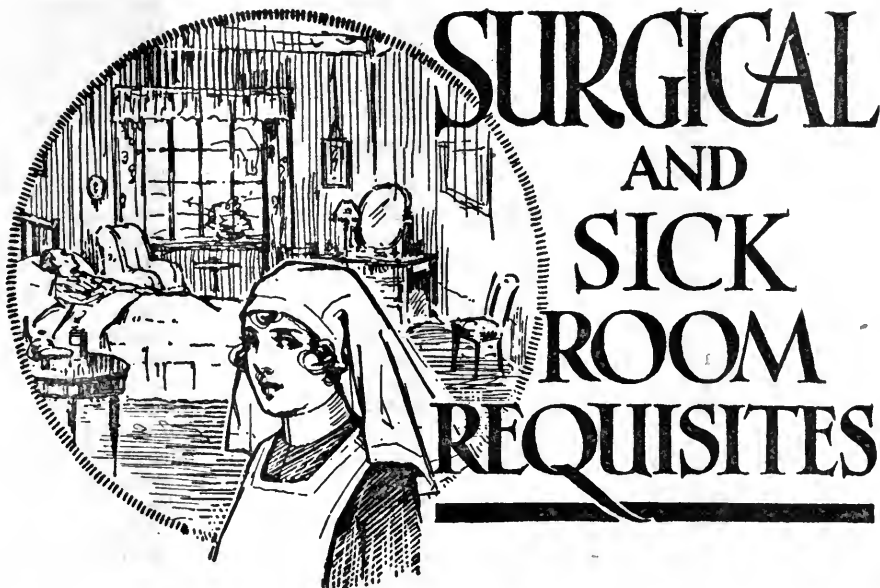
### 80 PER CENT. OF POPULATION ATTACKED.

The *Times* correspondent reports from Berne that in order to relieve to some extent the sufferings of the Ukraine, which is more devastated by epidemics than any other country in Europe, the International Red Cross Society is forming immediately a small mission which will proceed to the Ukraine and take up its headquarters somewhere near the Rumanian frontier.

Although the size of this mission will be small, it will act as distributing agent for large quantities of medical materials, considerable stores of which are already waiting transportation in Vienna and Berlin. It is proposed that the staff of the mission, which will include doctors and nursing sisters, should all be of the same nationality, and the Red Cross Society has appealed to the Swiss to act as the pioneers in the work of saving the Ukraine.

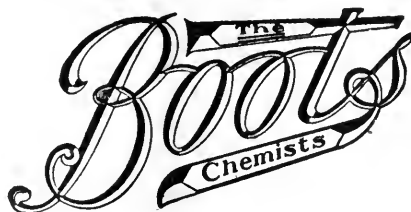
It is, of course, hoped to follow up this first mission with a complete organisation of relief, whose principal task will be the fighting of typhus, which, according to Major Lederrey, a delegate of the International Red Cross Society who recently visited the country, has attacked over 80 per cent. of the population.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

TRUE TALE WITH A MORAL TO STATE  
REGISTRATIONISTS.

## IT COULDN'T BE DONE.

Somebody said that it couldn't be done,  
But he with a chuckle replied  
That "maybe it couldn't," but he would be one  
Who wouldn't say so till he'd tried.  
So he buckled right in with the trace of a grin  
On his face. If he worried he hid it.  
He started to sing as he tackled the thing .  
That couldn't be done, and he did it.

Somebody scoffed: "Oh, you'll never do that!  
At least; no one ever has done it."  
But he took off his coat and he took off his hat,  
And the first thing we knew he'd begun it.  
With a lift of his chin and a bit of a grin,  
Without any doubting or quiddit,  
He started to sing as he tackled the thing  
That couldn't be done, and he did it.

There are thousands to tell you it cannot be done,  
There are thousands to prophesy failure;  
There are thousands to point out to you one by one  
The dangers that wait to assail you.  
But just buckle in with a bit of a grin,  
Just take off your coat and go to it;  
Just start in to sing as you tackle the thing  
That "cannot be done," and you'll do it.

(Edgar A. Guest, Author of "Sunny  
Songs.")

## COMING EVENTS.

*April 29th.*—South-Western Polytechnic Institute, Manresa Road, Chelsea, S.W.: First of Course of Lectures on "Milk and Milk Products," by Mr. Cecil Revis, A.C.G.I., F.I.C., F.C.S. 7 p.m.

*April 30th.*—Matrons' Council Quarterly Meeting. Queen's Hospital for Children, Hackney Road, E. 3 p.m. Tea 5 p.m.

*May 1st.*—Royal British Nurses' Association. Inspection of Banner and Royal Charter. Piano, Miss Gladys Collier. 10, Orchard Street, Portman Square, W. Tea 3.30 to 5.30 p.m.

*May 1st.*—National Union of Trained Nurses. Annual Council Meeting, 46, Marsham Street. 2.30. Reception, to which members and friends of the Union are cordially invited (tea, 8d.) 5 p.m.

*May 2nd to 8th.*—Health Week.

*May 5th.*—Nurses' Missionary League. Sixteenth Annual Conference and Meeting. University Hall, Gordon Square, W.C. 10 a.m. to 9.30 p.m.

*May 7th.*—St. Paul's Hospital, 13A, Red Lion Square, Holborn, W.C.: First of a Course of free Lectures to Nurses and members of the Allied Professions, on "Venereal Diseases," by Mr. Leonard Myer, F.R.C.S. 5 p.m.

*May 8th.*—Fever Nurses' Association. Annual Meeting, Croydon Town Hall. Dr. R. Veitch Clark, President elect, will deliver an address. 2.30 p.m. Tea by kindness of Mayor and Corporation, Croydon Fever Hospital.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## CONGRATULATIONS FROM AUCKLAND.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—Congratulations on the passing of the Nurses' Registration Bills, the passing of which I read with keen interest in THE BRITISH JOURNAL OF NURSING which arrived here last week. The nursing world owes you a debt of gratitude for the strenuous way you have worked for over thirty years for State Registration. It is splendid that the Mother of Parliaments now recognises nursing as a Profession, not a pastime.

The greater part of last year I was in charge of a contingent of trained and registered New Zealand Sisters, sent by request of the Federal Government, Melbourne, to nurse the influenza epidemic. The work was strenuous but most interesting, and the help given by trained women was deeply appreciated.

Again, with heartfelt thanks for all the hard work you have expended on us all and the interest you have taken in our welfare.

Yours very sincerely,

S. E. POLDEN.

An Old Bart.'s Nurse.

Bombay, Auckland,  
New Zealand.

FOR AND AGAINST THE USE OF  
PROPHYLACTIC PACKETS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I was pleased to see the announcement of the subject for competition in your issue of April 3rd (prophylaxis), and think it would be well if we could hear several opinions on this subject—both for and against.

It is a problem which must be faced by all humanitarians; and although a moral and social rather than a medical question, yet the public look to doctors and nurses for a lead.

To quote the prize-winner: "Humanitarians have to consider the safety of large numbers, especially of the innocent, rather than the advisability of salutary individual experience."

But I feel we have to boldly face a more definite question than that, viz.:—

"Do we wish the packet system introduced into civil life? Do we desire our youths instructed that Government provides centres where, after practising immorality, they can rid themselves of evil consequences?" Should we approve the teaching of a schoolmaster or father who taught, "You must never forge a cheque; nevertheless, in case you find you have to do it, or have done it, I will teach you how best to disguise your writing and to erase signatures."

Miss Bielby hits the nail on the head when she says that reform must come and can only come by more direct teaching to our young people; and mothers must accept this as one of their greatest duties. I think we may say they are learning to do so. We have to remember, therefore, that legislation is for the immoral man—the man who has escaped or refused to listen to such teaching.

Let us for a minute look at the consequences. Suppose the method were adopted, and successfully so; in fifty years' time venereal disease might be very much decreased, might possibly be rare (in men), but immorality would be far more prevalent. The ruin of the lives of young girls, the broken hearts of mothers who have lost their daughters, the number of unwanted and uncared-for babies, can we advocate and definitely work for a system which will increase these?

No; it seems to me that, awful as is the suffering of the innocent and unborn, our duty, while curing the disease where we can, is first of all to use every influence and opportunity we have to lessen the sin.

If, as women, we at all are party to the necessity of promiscuous intercourse, we throw away our chance of bettering the state of things in the world.

The terrible and undeserved suffering which we do not understand, and are powerless to stay, we must "leave to a Higher Power"; nor can we expect the help nor invoke the blessing of that Power on our work as long as we consent to any lower standard of chastity than that set forth by the Great Teacher in the 5th chapter of St. Matthew's Gospel.

General Hospital, E. CARRIE EVANS.  
Wolverhampton.

[We shall be pleased to have discussion on this important health question, but must once more remind our correspondents that letters should not exceed 250 words.—ED.]

#### KERNELS FROM CORRESPONDENCE.

We have received a large number of cards during the past week from nurses in private practice objecting to inclusion in the Hours of Employment Bill—1, Because it would prevent efficient nursing; 2, because it would bring into competition with the trained nurses more and more unskilled workers.

NOUS SOMMES LÀ.

*F.F.N.C. Sister*: "It is high time our legal title was in use so that the Press—so ignorant—may realise nursing is now a profession. In reporting the appointment of the General Nursing Council, the *Evening Standard* sets out all the lay and medical names, and dismisses our professional representation in the following manner: 'A number of nurses are also appointed,' including, by the bye women who promoted and paid for the movement! As for the *D.T.*, it has lost its temper badly. No one whose heart does not bleed for the sorrows of 'Juliet' and who has dared to object to this

'ghost' as a collector of charity from our patients on our behalf is worthy of mention.

*N'importe nous sommes là."*

#### SAVE BRITISH CHILDREN FROM GERMAN KULTURE.

*Mother of the Dead*.—Can you tell me if we mothers bereaved in the horrible war by German and Austrian barbarity, and jealousy of this country, are being taxed to entertain the hundreds of enemy alien children, coming to England at an early date from Central and Eastern Europe—that is, from Germany and Austria? If so, I feel inclined to go to prison for non-payment of taxes.

(We advise our correspondent to write to the Secretary of the "Save the Children Fund," Room 130, 26, Golden Square, Regent Street, London, W.1, for information. She might also ask how much has already been expended in the leading newspapers in whole-page and half-page advertisements of the Fund; it must already amount to a huge sum. The statement made in a *Times* advertisement that it is "The Paramount Duty of Great Britain as a Nation, and of every True Briton as an Individual," to "Help and Succour" these Aliens (aged from four to fifteen) and "At Once," is an abominable insult. The paramount duty of every Briton is to help and succour the thousands of heroic men who have suffered in saving the Empire, their wives and children, and the widows and orphans of those who died to save us and our country from fire and sword, rape and madness; and to keep out of the United Kingdom the progeny of the murderers and other criminals who organised the war. Let those who wish to help and succour German and Austrian children do so in their own countries. We should not run the risk of their infecting our children with their "Kultur." The whole movement is the result of effete passivism; and in our opinion it is the "Paramount Duty" of every robust Briton to refuse to finance it. Leave that to the wealthy Germans still in our midst, exploiting the wealth of this country, and other aliens of enemy antecedents in high places.—ED.)

#### OUR PRIZE COMPETITIONS.

##### QUESTIONS.

*May 1st*.—State (1) How to organise an eight hours' day for nurses in hospitals, (2) How to organise a forty-eight hours' week for nurses. State (a) the number of beds in ward, (b) the number of nurses required for duty in ward. State hours on and off duty.

*May 8th*.—Prescribe a diet for a case of diabetes. Give a warning of what to avoid. Outline diet for cases of (a) Pneumonia; (b) Nephritis.

*May 15th*.—What are the symptoms of the presence of adenoids and diseased tonsils in a child? What ill results may follow their neglect?

# The Midwife.

## CENTRAL MIDWIVES' BOARD. MONTHLY MEETING.

A meeting of the Central Midwives' Board was held at 1, Queen Anne's Gate Buildings, Westminster, on Thursday, April 22nd. The first business of the meeting was the election of the Chairman, and Sir Francis Champneys was unanimously re-elected.

A letter was received from Lady Morant, thanking the Board for its message of sympathy on the death of her husband, the late Sir Robert Morant.

A letter was also received from Mr. E. H. Phillips of the Ministry of Health, stating that the Minister of Health approved for the purpose of the apportionment of contributions from Local Supervising Authorities, the balance of £3,395 7s. 10d. shown against the Board in the Financial Statement for the year 1919.

### APPLICATIONS.

*For Approval as Lecturer.*

The following applications were granted:—Robert Gordon Bell, M.D., F.R.C.S.; George Dean Compston, M.R.C.S., L.R.C.P.; Robert Stephen Hubbersty, M.D.; James Ramsbottom, M.B., D.P.H.; Ernest William Gurney Masterman, M.D., F.R.C.S.

*Of Registered Medical Practitioner for Approval as Teacher.*

The following application was granted *pro hac vice*:—John Goodisson Boon, L.R.C.P., L.R.C.S.

*Of Certified Midwives for Approval as Teacher.*

The following application was granted:—Edith Kate Roberts (No. 22805).

The following applications were granted subject to extern work being provided:—Hilda Ethel Mason (No. 30303); Jane Carnegie Wishart (No. 29243).

The following applications were granted *pro tem*:—Elizabeth Alice Holford (No. 44428); Edith Milo Laura Davies (No. 31563).

Applications to be certified by the Board, by reason of holding the Certificate of the Central Midwives' Board for Ireland were received from eight midwives, and the applications granted conditionally on the payment of the fee of one guinea.

The Secretary reported that in conformity with a Resolution of the Board, he had placed on the Roll the names of five midwives holding the Certificate of the Central Midwives' Board for Scotland.

Applications were received and granted from twelve midwives for the removal of their names from the Roll.

The List of Institutions, Homes and Midwives at which and under whom pupil midwives may be trained, as submitted by the Secretary, was adopted, and it was resolved, that approval be continued until March 31st next.

## CLOTHING OF INFANTS AND YOUNG CHILDREN.

On Friday, April 23rd, Miss Isabel Macdonald (Medallist of the Royal Sanitary Institute), lectured on the "Clothing of Infants and Young Children," at the Institute, 90, Buckingham Palace Road. This was the last lecture of the course for students preparing for the Health Visitor's Examinations.

Miss Macdonald dealt principally with the clothing of infants and exhibited specimens of the model garments used at the headquarters of the Babies of the Empire Society, at Trebovir Road. Explanations were given with regard to the best materials for the infants' clothing and the points which mothers should understand in connection with the washing of these materials. The chief drawbacks of the binder were pointed out and the effects of overclothing in the training of the child's thermotaxic centres and in connection with its metabolism were explained. Perambulators and cots and the objections to the comforter were other items in the syllabus. Reasons why the ordinary hood of the perambulator is unhygienic in practice were explained; while details were given as to the best cots for the babies of poor mothers and how to prepare these. The comforter was condemned on the grounds that it encourages adenoid growths, leads to malformation of the mouth, and induces digestive disturbances owing to the over-stimulating and permanent enlargement of the salivary glands.

## NATIONAL BABY WEEK COUNCIL.

Viscount Astor is to preside at the Council Meeting of National Baby Week to be held at the Armitage Hall, Great Portland Street, W., on May 11th, when interesting addresses will be delivered with discussion to follow on:—

"The Development of Infant Welfare and Ante-Natal Work in Rural Districts": Dr. Helen Swatman (Medical Officer for Maternity and Child Welfare Centres in Herts).

"The Problem of the Unmarried Mother and her Child": Mrs. H. A. L. Fisher.

"The Children's Era": Mr. T. Vivian Rees (Founder of the Movement).

The Meeting will be open to non-members of the Council by ticket, which may be obtained free on application to the Secretary.

We should advise nurses and midwives to read "Feminism and Sex-Extinction," by Dr. Arabella Kenealey—there is a vast amount of truth in it. We love beauty, not only of face but of form. Dr. Mathews Duncan told us long ago why women failed to have the lovely rounded contours of their grandmothers. Dr. Kenealey drives it home.

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
**THE NURSING RECORD**  
EDITED BY MRS BEDFORD FENWICK

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SATURDAY, MAY 8, 1920.

Vol. LXIV

## EDITORIAL.

### THE NIGHTINGALE CENTENARY.

On May 12th, 1820, there was born in the fair city of Florence a child of Destiny whose name, wherever it is spoken, is held in honoured remembrance.

To the world at large that name is chiefly associated with the nursing of the sick and wounded in the Crimean war, but to the Nursing Profession it stands for much more, for Florence Nightingale, for the first time, laid down the laws which underlie the practice of nursing with scientific precision, and to-day the rules defined in her "Notes on Nursing," published sixty years ago, are those on which efficient nursing is founded.

Florence Nightingale is a popular heroine, and as such her personality has been more or less obscured as the ministering angel and the aureoled saint. Time is creating a truer conception of her great character. Her biographer, Sir Edward Cook, tells us that she "was by no means a Plaster Saint. She was a woman of strong passions—not over given to praise, not quick to forgive; somewhat prone to be censorious, not apt to forget. She was not only a gentle angel of compassion; she was more of a logician than a sentimentalist; she knew that to do good work requires a hard head as well as a soft heart."

Brought up in a spacious and gracious environment, Destiny shaped fine material into a fine implement for the colossal work demanded of her. She was richly endowed with brains, with executive ability, with the qualities of statesmanship. Queen Victoria's remark: "I wish we had her at the War Office," showed

true insight into her character. But her tongue was as a razor, her speech pungent, her pen incisive, and her methods peremptory.

The two most distinguishing traits in her character are her thirst for knowledge and her love of thoroughness. She was willing to take any pains to secure the first, and she insisted on the necessity for the second with all the vigour at her command. She recognised the futility of any struggle against disease which is not based upon a knowledge of the underlying causes, and the hopelessness of any remedies not directed to the removal of those causes.

In addition, she claimed for those whose duty it is to care for the sick a thorough education in the practical methods and technique of their calling, and she practised what she preached. She told the Royal Commission of 1857, "I have visited all the hospitals in London, Dublin and Edinburgh, many county hospitals, some of the naval and military hospitals in England; all the hospitals in Paris, and studied with the *sœurs de charité*"; the Institution of Protestant Deaconesses at Kaiserswerth on the Rhine, where I was twice in training as a nurse; the hospitals at Berlin, and many others in Germany, at Lyons, Rome, Alexandria, Constantinople, Brussels; also the war hospitals of the French and Sardinians." Miss Nightingale had no use for "fashionable asses," and she warns us that the Divine blessing was never promised to slipshod work.

It is not only on account of her commanding genius, but because of her insistence on thoroughness, that her work abides, that she is to-day held in universal honour, and that the hundred years which have passed since her birth add to the lustre of her name.

## THE FLORENCE NIGHTINGALE CENTENARY AT THE ABBEY.

On Wednesday, May 12th, the Centenary of the birth of Florence Nightingale, the Dean of Westminster will give an address at Evensong in the Abbey, at 3 p.m. Seats will be reserved for members of the Nursing Profession. Tickets for these seats may be obtained on application to the Matron, St. Thomas's Hospital, S.E. 1, before May 10th, enclosing a stamped addressed envelope.

### NURSING ECHOES.

The 12th of May is indeed an historic day in the annals of nursing. On that date, in 1820, was born the great founder of scientific nursing—Florence Nightingale, the patron saint of nurses. Just a hundred years after that date, in 1920, the first General Nursing Council has been appointed, and those of us who form it cannot do better than apply the great fundamental principles of nursing she defined, as the basis of the Council's work in building up the Profession of Nursing.

We are glad to note that by the will of the millionaire, Mr. Howard Morley, Queen Victoria's Jubilee Institute for Nurses will receive a legacy of £1,000.

About this time of year the County Nursing Associations hold their annual meetings over the country. We note the same cry from them all—a great scarcity of nurses for district work. The inevitable has happened. Firstly, these well-meaning but unprofessional associations undermined the standard of nursing of the three years' trained nurse, and for the sake of cheapness, largely superseded her by the uneducated midwife, with a few months' hospital nursing experience—we do not consider it training in the true sense of the word—and then the salaries offered are not sufficient to tempt either class of worker, and the vain hope that V.A.D.s are going to fill the breach, and do arduous and dull district work (we don't think it dull, but they do, after all their foreign service, and fulsome press prattle), is a veritable will o' the wisp, and a very good thing, too!

Cornwall County Nursing Association is seriously perturbed over the shortage of nurses, Sir A. May stating at the annual meeting last week that it had been hoped that when nurses and V.A.D.s were released from war service there would have been no difficulty in finding among the trained nurses women who would

carry out their plans for providing efficient midwifery, service for ante-natal work among mothers, school nursing, and health visiting, as well as the routine work associated with district nursing, and also that they would offer themselves for special training and subsequent employment in the county. On the other hand, the reality had been very different. The trained nurses were most unwilling to undertake any branch of district nursing, especially midwifery. They considered that in the past the salaries had been insufficient for the heavy work they were called upon to do, and they had no difficulty in getting well-paid posts with less responsible work and shorter hours. Semi-trained and untrained women were unwilling under present conditions to submit to either the necessary training or discipline. It was reported that new associations had been started in six towns. The total number of districts in the county was 108, employing 132 nurses, of whom ten were Queen's nurses or their substitutes. Does this mean that the remaining 122 were not thoroughly trained district nurses?

The Guild of Health—one of the objects of which is to study the influence of spiritual upon physical well-being—is arranging a special meeting for nurses in June at the Caxton Hall on the subject of "The Mental and Spiritual Factors in the Healing of the Sick." This is a subject in which many nurses are deeply interested. They can learn more of the work of the Guild by applying to Miss Rogers, the Organising Secretary, 6, York Buildings, Adelphi, W.C. 2.

We have the greatest faith in the power of the professional press, and have great pleasure in again receiving our exchange copy of the *Nursing Journal of India*, suspended in June, 1919. Evidently the nurses of India don't feel like doing without it. The present issue contains a full account of the Nursing Conference held in Delhi at the beginning of the year, at which a resolution in the following terms was passed: "That this conference is of the opinion that State Registration of Nurses in India is essential to the protection of the trained nurses, and also to the further development and uplift of the profession." The action of the home Government on this matter should be a strong argument for justice to the nurses of India. Our sisters in India have two professional organisations, through which they should be able to attain legal status. Let them do as we did draft a Bill, and give the Government no peace till it becomes law.



Miss Isabel M. Stewart, of Teachers' College, Columbia University, U.S.A., has asked for copies of "The Nursing Pageant," by Mrs. Bedford Fenwick and Miss Mollett, for the College Library, as the one in use is "getting quite worn out." Miss Stewart writes: "You will be interested to know that the students and graduates of this Department (of Nursing and Health) have collected a fund to form a historical nursing library in honour of Miss M. Adelaide Nutting (Professor of Nursing). We are very anxious to gather together all the interesting things we can connected with nursing and hospital work, and we are particularly keen to have anything of significance connected with "Florence Nightingale."

Some years ago we started an International Nursing Library, and have thus secured to future generations of nurses the complete file of the *BRITISH JOURNAL OF NURSING* and *NURSING RECORD*, now sixty-three volumes; a complete file of *The Nurses' Journal*, the official organ of the Royal British Nurses' Association; a complete file of *The American Journal of Nursing*, &c.; all reports of the meetings of the International Council of Nurses; and papers, pamphlets, and letters of historic interest; copies of every Nurses' Registration Bill drafted in the United Kingdom; and Blue Books containing matters of interest to the nursing profession. All these valuable journals and records of the history of the nursing movement for the past thirty-two years are now invaluable. Who will preserve them when the pioneers have passed away? No doubt the General Nursing Council, the outcome of all these documents and propaganda, will form its own Nursing Library, and if so, it will be the best custodian of its own pre-natal literature.

The late Mr. George Courtauld, of Cut Hedge, Halstead, Essex, left his nurse, Miss Elsie Chambers, £1,000.

The Hon. Sir Charles Abercrombie Smith, of St. Cyrus, Wynberg, Cape Province, South Africa, left £500 to his nurse, Miss Sara Smith, in appreciation of her untiring and devoted service.

How little interest the proposal for an eight-hours' day arouses in nurses in hospitals and kindred institutions is demonstrated by the fact that not one paper has been received in reply to our competition question this week asking for schemes for arranging the work of nurses in such institutions on the basis of an eight-hours' day, or a forty-eight hours' week.

## THE MATRONS' COUNCIL OF GREAT BRITAIN AND IRELAND.



The Quarterly Meeting of the Matrons' Council was held by kind invitation of Miss A. M. Bushby, Matron, and the Committee of Management, at the Queen's Hospital for Children, Hackney Road, on April 30th. Before the business meeting the members paid a visit to the beautifully kept wards, which were exquisitely tidy and gay with flowers. The walls are for the most part tiled with green and white tiles, while the French windows open on to wide balconies, on to which the cots can be easily wheeled. Every cot seemed occupied in this busy hospital, but throughout it scarcely a cry was heard, and in spite of the serious illnesses of many of the little patients happiness was the prevailing note. We noticed the cupboards marked Poison, and with glass doors, through which the contents were plainly visible, padlocked, as they always should be. In the case of one mite, to whom oxygen was being administered, the bottle (standing in a bowl of warm water) into which it was conveyed from the cylinder, and passed through brandy, had hanging over it a hood, which is the device of the senior physician, Dr. Porter Parkinson, so that the warmed oxygen as it emerges from the bottle is not diffused, and the patient gets the full benefit of it.

The operating theatre is so arranged as to be flooded with a north-east light, the white tiled walls reflect it, the roof and two sides of the walls are almost entirely of glass, the copper operating table, the glass tables, shelves, and fittings were all immaculate. The kitchens and laundry, where all the workers were as busy as bees, and the Nurses' Home were all visited in turn.

### THE BUSINESS MEETING.

The Business Meeting, at which there was an excellent attendance, was held in the Board Room of the Hospital, and, in the much regretted absence of the President, Miss M. Heather-Bigg, R.R.C., the chair was taken by Mrs. Bedford Fenwick, who, on her arrival at the hospital, was presented by Sister C. M. Bulteel, R.R.C., with a lovely and fragrant sheaf of roses, carnations and lilies of the valley, which members of the nursing staff had visited Covent Garden to procure that morning, and which naturally gave the recipient very great pleasure.

Amongst the correspondence letters were received from the Lady Mayoress, Brigadier-General Page-Croft, M.P., C.M.G., Miss Amy

Knaggs, R.R.C., and Lieut.-Colonel Howard Mummery, General Secretary of the Federation of Medical and Allied Societies.

A Report was also made as to the proceedings of the Sub-Committee of the Women's Health Watching Council (at present confidential except to the societies concerned) and action taken thereon.

It was proposed, from the chair, and unanimously agreed, to send a message of congratulation to Miss Elma Smith, Matron of the Colindale Hospital, Hendon, one of the original members of the Council, on her progress towards recovery after her recent critical illness.

Applications for membership were received and considered, and the applicants duly proposed and elected. There were no resignations.

The Chairman congratulated the Matrons' Council, which throughout the twenty-six years which have passed since its foundation has stood firm for State Registration of Nurses and worked to attain it, that Nurses' Registration Acts, incorporating the basic principles for which it so long contended had now been passed, and that amongst the trained nurses appointed on to the General Nursing Councils to administer the Acts, three were in the room that afternoon—herself, Miss Dowbiggin and Miss Villiers. Their policy would be to do their very best for the interests of the whole profession.

Miss Dowbiggin and Miss Villiers spoke in support of this policy.

The meeting concluded with a cordial vote of thanks to the Committee of the Hospital and to the Matron, Miss Bushby, for their invitation to the Council to meet there.

A dainty tea was then served with expedition and deftness, Sisters, Nurses and maids all hospitably attending upon the guests. It did one's heart good to see the neat uniforms, tidy heads and becomingly worn caps—no need to take a peep behind in order to discover whether a cap was there or not.

The Secretary of the hospital, Mr. T. Glenton-Kerr, gave much pleasure by joining the members at tea time, and amongst the honoured guests was Miss Isabel Macdonald, Secretary of the Royal British Nurses' Association.

### IRISH NURSES' ASSOCIATION.

At the monthly meeting of the Irish Nurses' Association, held at 34, St. Stephen's Green on May 1st, Miss Hezlett, in the chair, it was decided to call a Special Meeting on May 8th to discuss the effects of an eight-hour day. All members and nurses interested are invited to attend.

### DEATH OF SIR HENRY BURDETT.

The press reports the death of Sir Henry Burdett, editor of the *Hospital*, and of the *Nursing Mirror* on Thursday, April 29th. Cremation took place at Golder's Green on May 3rd.

## THE NATIONAL UNION OF TRAINED NURSES.

### ANNUAL COUNCIL MEETING.

The Annual Council Meeting of the National Union of Trained Nurses was held at 46, Marsham Street, on May 1st. Miss Cancellor presided.

Miss Helen Pearse, Superintendent of the London County Council School Nurses, was appointed President, and received a warm welcome.

A letter from Miss Heather-Bigg, R.R.C., retiring President, expressing continued interest in the work of the Union, was read, and Miss Pearse, on behalf of the Council, proposed a cordial vote of thanks to her for her unfailing support and wise counsels.

Miss Farrant, Inspector Q.V.J.I.N., was appointed Hon. Secretary. Miss Rimmer remains as Hon. Organising Secretary and Treasurer. The Executive Committee's Report included an account of the work done for the attainment of State Registration and the following expression of gratitude:—"The thanks of our members are due to Mrs. Bedford Fenwick and the faithful band of workers who have for years striven to achieve this result; to the various members of both Houses of Parliament who have introduced and supported the previous Bills which led up to the present Act; and to Dr. Addison, Minister of Health, and the late Sir Robert Morant, Permanent Chief Secretary of the Ministry of Health, for the framing, introduction and safe passage of the Act."

Miss Eden explained that since the Report was submitted to the Executive Committee, the First Nursing Council for State Registration had been formed, and its representative character was a subject of satisfaction to all those who had supported the Central Committee and who upheld the standard of justice and fair play. The members present expressed great pleasure at the fact that two members of its Executive Committee had been appointed to seats on the General Nursing Council.

Some changes in the constitution were made to provide for the decision already arrived at, that no person should in future be admitted to the Union who had not received at least three years' training in a general hospital of not less than a hundred beds. The standard of training of the Union is therefore a high one, and compares favourably with that of other bodies. The subscription has been raised to £1, and now includes all the benefits of the Employment Centre, which it may interest readers to know, has in the last five months filled 48 per cent. of the posts applied for. The subscription will also include membership of the club which it has been decided to open at the office of the Union, where there will also be a few bedrooms available at moderate fees for members of the Union. It was announced to the Council that Miss Pye, member of the Union and former Secretary, had received the high honour of being appointed Chevalier of the Legion d'Honneur by the President of the French Republic.

## THE RECEPTION.

The guests who were invited to join the members of the National Union of Trained Nurses at the conclusion of their business meeting shared with them a very delightful function.

After tea had been enjoyed in the pleasant offices, bright with wild hyacinths and other spring flowers, everyone adjourned to the lecture hall upstairs, when Miss Helen L. Pearse, the newly elected President occupied the chair.

The first business in hand was a presentation to Miss Eden, and Miss Pearse read letters from Miss M. Heather-Bigg, R.R.C., the outgoing President, and from Bristol, speaking in the warmest terms of Miss Eden's work.

Miss Pearse also spoke of the great services which Miss Eden had rendered to the nursing profession, and of her high ideals, which were an inspiration to all associated with her. During the days when the Nurses' Registration Bill was before Parliament last year, she had been able to voice the nurses' views in the public press when it was possible to gain admission for letters on this subject.

It was a very great pleasure that her first official act as their President was to ask Miss Eden's acceptance of a cheque for £57 as a token of their appreciation.

Miss Eden said that she could not find words in which to say thank you, but her heart was one big "thank you" for their kindness. She thought the donors knew to what she would devote their gift, and that the thing she wanted most in the world was cottages in the country, with perhaps a small annuity attached, for old and lonely nurses. She took the opportunity of thanking the Committee for their unfailing friendship, also those outside the Union for many kindnesses, and countless people who had thanked her quite unconsciously with a kind word, a smile, or a nod at the right time.

She was sure also that they all wanted to thank some of those present who had fought for what at times seemed lost causes, but which finally triumphed because they were founded on principles which were everlasting.

An illuminated address, which embodied the thanks of the Union to Miss E. M. Platt for all her skill in designing posters, as well as her latest work, the delicately beautiful banner of the Union, was circulated in the room and much admired.

Miss S. M. Marsters then handed to Miss Rimmer a handbag containing a cheque for £23, which the donors hoped she would devote to her personal

use. She referred to the way in which Miss Rimmer had stepped into the breach as their Organising Secretary in troublous times and to her work in the Lobby of the House of Commons for the Nurses' Registration Bill.

Miss Rimmer, in warmly acknowledging the gift, emphasised how much she had gained by contact with the members of the Union.

The President then said that as Mrs. Bedford Fenwick had honoured them with her presence, perhaps she would say a few words, and Mrs. Fenwick, in responding, testified to the invaluable help she had received from Miss Eden in drafting documents, and also to Miss Rimmer's excellent work in the Lobby.

Referring to the Nurses' Registration Acts Mrs. Fenwick said that they gave the free field and no favour to the whole nursing profession for which the Central Committee and the societies affiliated to it had always contended.

The proceedings concluded with a few words from Miss Dowbiggin on a note of hope and unbounded enthusiasm.

The Mayoress of Grimsby, Miss Hobbs, presented Medals to the following probationers at the Infirmary, Scartho Road, on April 28th: Nurses Hewitt, Williams and Robinson (who received respectively the "Jeffs" gold, silver and bronze medals), and Nurses Horgan, Gibbons and Springham (who got respectively fourth, fifth and sixth prizes, presented by Canon Quirk, Ald. Fletcher and Coun. Barrett).



MISS HELEN L. PEARSE.  
President, National Union of Trained Nurses.

## THE GENERAL NURSING COUNCIL.

The first meeting of the General Nursing Council will be held at 2 p.m. on Tuesday, 11th inst., at the Ministry of Health, Whitehall, S.W.

The Ministry of Health states that in the announcement made on April 21st of the appointment to the General Nursing Council, the name of Miss M. J. Tuke, of Bedford College, appointed by the Board of Education, was in error given as Miss Batty Tuke. In our synopsis of "Who's Who" on the General Nursing Council, we last week made the correction.

Miss Constance Worsley informs us that she was appointed Matron of the Infirmary for Children, Liverpool, in 1907, not in 1917, as reported in our last issue, so that she has held this responsible position for thirteen years, and comes to the aid of the General Nursing Council with ripe experience in the training of nurses for sick children.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## NURSE COUNCILLORS.

The following nurses, appointed by the Minister of Health to serve on the General Nursing Council for England and Wales, are members of the Royal British Nurses' Association:—Mrs. Bedford Fenwick, Miss A. Cattell, Miss Dowbiggin, Miss Villiers and Miss Isabel Macdonald, the Secretary of the Association. Of those appointed to serve on the General Nursing Council for Scotland, Miss Mary Hunter and Miss Margaret Stewart are also members of the Chartered Corporation. On the General Council for Ireland the following are R.B.N.A. members:—Miss Margaret Huxley and Miss Alice Reeves. It has also given very deep gratification to the R.B.N.A. Nurses to see the name of Dr. Goodall, a much respected Member of the General Council of their Association on the list of members of the English Council.

Nurses should remember that the nurse representatives on the Council are appointed to voice not merely the views of the Societies to which they may belong, but to promote the interests of the whole profession. Through her professional representatives on the Governing Council of her profession every nurse can take part in its organisation, and the "nurse Councillors" will look forward to receiving expressions of opinion and suggestions from nurses in all branches of the profession.

## THE "BANNER TEA."

On Saturday last a number of the Members gathered at 10, Orchard Street to inspect the new Banner which they have provided for their Association as a memento of the passage into law of the Nurses Registration Bill. The details of the beautiful badge, on its background of "Royal Blue" silk, were greatly admired, especially the national emblems of the different countries. The colours in the embroidery of these are most delicately blended, but the Scotch nurses present came in for some good-natured raillery upon the "obstinate and touch-me-if-you-dare" attitude of the thistle, erect between two arms of the cross.

Miss Gladys Collier, a very gifted young pianist and niece of that popular member of the Council, Miss Alice Cattell, gave a very varied entertainment at the piano and her beautiful playing was indeed greatly enjoyed.

## APPOINTMENTS.

Miss Gertrude Mellor, M.R.B.N.A. has been appointed Matron-Housekeeper at the Diamond Works at Acton Park, Wrexham, Denbigh, where disabled men are employed on the work of polishing diamonds. Miss Mellor was at one time Matron of the General Hospital, Cheltenham. After her resignation of this appointment she was Matron of a large school, and, during the war, of a munitions colony in the Midlands, so that she is well equipped for her new post. She has proved herself to be an able administrator.

Miss Appleyard, M.R.B.N.A., has been appointed Assistant Matron at the West House, Morning-side Asylum, Edinburgh. She formerly held a similar post at Roxburgh District Asylum. Miss Appleyard holds the certificate of the Mental Hospital, Leek, and of North Ormesby Hospital. Miss Appleyard has a strong sense of the powers and responsibilities of the individual, and takes a keen and practical interest in the organisation of her own profession. We are glad to find nurses of an alert and public spirited type of mind, taking important appointments in Mental Hospitals where such qualities are of far-reaching value not merely in so far as the patients and governors of such institutions are concerned, but in promoting the general efficiency and improving the status of women engaged in what is one of the most important branches of the profession.

Miss Florence Dunning, M.R.B.N.A., has been appointed travelling school nurse and health visitor for the North Riding of Yorkshire, which offered wide experience in what is becoming an increasingly important branch of work for trained nurses.

## ASSOCIATION OF TRAINED NURSES IN PUBLIC HEALTH WORK.

### CLINICS AND DAY NURSERIES FOR THE MIDDLE CLASSES.

At the meeting of the Association of Trained Nurses in Public Health Work, held recently, at the Rooms of the Royal British Nurses' Association, Mrs. Paul spoke on "Clinics and Day Nurseries for the Middle Classes," and Miss Florence Wise took the Chair.

In her opening remarks the speaker said, we are accustomed to the idea of the hospital for the poor, the infirmary for the destitute, but there is no such provision made for the middle classes—the new poor. It is time that the hospitals were re-organised. By taking payments from patients according to their means, a steady source of income could be secured, and the needed special treatment or advice would be available for those who cannot afford a specialist's fee or a nursing home.

In Germany a far larger number of small school children wear glasses than in England. The reason for this, said Mrs. Paul, is not that German children suffer from eye strain more than English children; indeed the minimum age for admission to the schools in Germany is seven, as against five years in England; but the medical examination and treatment of young school children is much more searching there than in England. We recognise the clinic as the proper place for the treatment of minor ailments; the out-patient department as the place where the advice of the specialist can be sought. How can both these be made available for the new poor as well as for the artisan or the mechanic? The speaker suggested that the grading of hospitals would largely solve this problem, and that it ought to be possible for paying and free patients to be seen on the same afternoon.

Day nurseries, or, as she preferred to call them, nursery schools, are a necessity for the middle classes. The income of the ordinary professional man is such that he cannot contemplate marriage and the rearing of children till he is about forty, and unless marriage is so delayed that the parents cannot expect to bring healthy, robust children into the world, the wife must take her share in contributing to the exchequer—a girl should be provided with a career rather than with a dowry. The nursery school should receive the children from two to seven or, preferably, eight years of age. The mother should have the care of the child for the first year of its life; no other can take the place of the mother during that period. Even an indifferent mother is far better than the most perfectly-equipped day nursery. The child should grow easily and happily, learning to be self-reliant and self-helpful, without any of the atmosphere of nervous strain that seems unavoidable in the school proper.

Nursery schools should prove a bridge in the training of infant welfare workers between the leaving school age and the time for entering hospital for general training. The speaker urged that the knowledge of the healthy normal child is one of the essentials in the preparation for Infant Welfare work.

In the discussion that followed, Miss Le Geyt said she found that the girl straight from school is not sufficiently educated, and that attendance at evening continuation classes leaves the student too jaded and tired to attend to any work at the clinic in the day.

In contrasting the training of the medical student with that of the nurse, Miss Macdonald

pointed out that in the five years of his course the medical student receives training in all branches of his profession, while the nurse, at the end of her three or four years' course, has to provide herself with further training in midwifery, &c. The Chairman raised the point as to how the general practitioner or the specialist would regard the idea of clinics for others than the poor. Replying, Mrs. Paul said we must look forward to the time when girls and boys will remain at school till eighteen years old. The training of a nurse should thoroughly equip her in all branches of her profession, and the four years' course should include midwifery and public health work. With regard to the doctor's attitude towards clinics she advocated the payment of all professional workers, including the medical profession, for their services.

## CORRESPONDENCE.

### "STEADFAST AND TRUE."

*To the Secretary R.B.N.A.*

DEAR MADAM,—It is a great pleasure to see our beautiful banner and all it signifies. To me that alone is worth fighting for, and I hope all the young members will realise its significance and carry on our standard with the motto untarnished: "Steadfast and True."

I am, sincerely yours,

ALICE CATTELL.

### HELENA BENEVOLENT FUND.

The Hon. Treasurer acknowledges with thanks the following donations:—

1s. 6d.—Misses C. Fenning and A. Sooby.

1s. 3d.—Miss C. Clarke.

1s.—Misses E. Ayres, Blizard, Blomfield, Bramwell, Mrs. Collett, Misses Crowsley, S. Davidson, A. Dean, Douglas, Duffield, D. Evans, E. Freear, Fidler, Fisher, A. Haynes, E. Glanville, C. B. Grieve, Barnes-Groom, M. Halkett, E. Hanrahan, A. L. James, C. Maclean, M. H. Mothersell.

### NOTICE TO MEMBERS.

Owing to the increasing work at the office of the R.B.N.A., and to the necessity in future for her attendance at meetings of the General Nursing Council, the Secretary regrets that, except by special appointment, she can only give interviews to members who call between the hours of 10 and 12 noon. Members who cannot call between these hours and who wish to see her regarding any business, should write to the office stating when they are free and she will always have pleasure in arranging for appointments with them.

ISABEL MACDONALD,

*Secretary to the Corporation.*

10, Orchard Street, W.

## HOSPITALS FOR THE NEW POOR.

### NURSING HOME, CHRISTCHURCH ROAD, STREATHAM.

Though the "new poor" have not many temporal mercies to be grateful for at this present crisis, one very substantial mercy has been provided for them by the local branch of the Red Cross at Streatham.

At the close of the war, the committee, finding that they had a substantial surplus of money in hand, purchased the house which had been doing duty as a V.A. Hospital, and presented it, for the purpose of a medical and surgical nursing home for the "new poor," and to this class of sufferers it is to be strictly confined. The uniform inclusive fee is to be £3 to 3 guineas weekly. Admission will be through the doctor in attendance on the patients, and the latter will thus have the privilege of being attended by their own medical man.

The house, a commodious one, in Christchurch Road will accommodate twenty-six patients of both sexes. It is moreover exceedingly well planned and fitted with every convenience for the efficient working of a modern nursing home. When in full working order, the nursing staff is to be provided with sleeping accommodation out, the Matron only having a bedroom on the premises.

The wards hold a varying number of beds, the largest providing for eight patients. The wall-papers have been chosen with thought and care, according to the aspect of the room, and are of soft shades of green or grey.

In the women's wards each bed is curtained, so that the patient can secure absolute privacy if she so desire. In all the rooms the bed curtains are of a deep shade of heliotrope, which harmonises extremely well with the pink bedspreads and the dainty mats of soft Persian hues. The men's wards are not curtained, but are provided with an ample number of screens. The lockers are of metal, enamelled white, and under each bed is a wooden stool which will serve a useful turn when lockers are otherwise engaged. A well-stocked bookcase is a feature in every ward.

On each landing provision is made for the preparation of the trays for meals which it is considered will relieve the congestion in the kitchen at meal time.

There is ample lavatory and bath accommodation, which is fitted with the latest sanitary improvements.

The theatre was equipped for the use of the wounded by the generosity of the Streatham Congregational Church without regard to expense, and the Home is to be congratulated on such a thoroughly up-to-date possession.

The central heating secures hot towel rails, airing cupboards, hot blankets ready for emergency cases, besides the general heating of wards and passages.

The fine conservatory is fitted as a lounge, which will no doubt prove a great boon to convalescent cases. The administration is greatly assisted by

the convenient cupboards and storerooms which abound on every floor.

In the basement there are a large kitchen, scullery, housemaid's closet, pantry, all well arranged and planned. The sinks are of teak with a view to minimise the mortality in crockery.

The Matron is Miss Bessie Carley, R.R.C., who was trained at the Warneford Hospital, Leamington, and was the medallist of her year.

During the recent war she served in France in the T.F.N.S., first as Sister and then as Assistant Matron, and was then drafted to the clearing stations. She is to be assisted by three qualified nurses, two paid probationers, and a certain amount of voluntary assistance from V.A.D.s who during the war acted in that capacity in the same house while it was serving as a soldiers' hospital.

Apparently nothing has been omitted that will minister to the comfort of the patients and to the efficient working of the home.

The ambulance, which was purchased by the Streatham Red Cross, is lodged in the adjoining garage, and is driven by the factotum who is gardener, porter and chauffeur all in one.

This Home meets one of the most urgent needs of the day, and it is to be hoped that many more of a like character will spring up all over the country.

Great care will be exercised in the Streatham venture to ascertain that applicants for admission are not able to pay more than £3 3s. fee, so that there will be no undercutting of the more expensive nursing homes.

## BRUSSELS HEALTH CONGRESS, MAY 19th TO 24th.

The Public Health Congress to be held in Brussels from May 19th to 24th, is to be a meeting of great importance. The King of the Belgians is patron, and the heroic Burgomaster of Brussels M. Max, with other prominent citizens are deeply interested in its programme.

The reception room will be at the Palais des Académies, near the Royal Palace, and will open on Monday, May 17th, at 10 a.m. The meetings will take place in the University of Brussels, Leopold Park. Receptions will be held by the King of the Belgians, the City of Brussels, the University of Brussels, and others, and excursions to Antwerp, Mons, Charleroi, Ghent, Louvain, and Liège are being arranged. Any person interested in the work of the congress may become a member on payment of a fee of £1 1s. to the hon. secretaries, 37, Russell Square, W.C.1.

The programme is arranged under the following heading State Medicine, Naval, Military, Tropical and Colonial, Municipal Hygiene, Industrial Hygiene, Hygiene and Women's Work, Bacteriology and the Harben Lectures.

The following full programme of the Women's Work Section, omits as usual any inclusion of Trained Nursing, although the promoters in Belgium sent a courteous invitation to the Inter-



national Council of Nurses, to take part in its proceedings, an invitation it was unable to accept:—

#### HYGIENE AND WOMEN'S WORK.

(Presidents—Dr. Mary Scharlieb and Dr. Clibert.)

#### PAPERS.

"Women's Work Under the Ministry of Health," by Lady Rhondda.

"Alcohol as it Affects the Community," Lady Astor, M.P.

"Ante-Natal Care," Lady Barrett.

"The Social Life of the Child," Lady Leslie Mackenzie.

"The Pre-Maternity Ward in Hospitals," Dr. John W. Ballantyne.

"The Physiology of Childhood," Miss Winifred Cullis, D.Sc.

"The Training of Personnel in Maternity and Child Welfare Work," Mr. J. S. Fairbairn.

"Women's Employment and Capacity for Motherhood," Dr. Letitia Fairfield.

"Mothercraft from Mothers' Point of View," Mrs. H. B. Irving.

"Ante-Natal Work and the Prevention of Infant Mortality," to be opened by Brevet-Colonel J. R. Kaye, Medical Officer of Health for the West Riding of Yorkshire.

"The Co-ordination of the various Branches of a Child Welfare Centre," Dr. Christine Murrell.

"Duties and Status of Midwives" Miss Rosalind Paget, Member of Central Midwives' Board.

"Housing and Infant Mortality," Dr. S. G. Moore, Medical Officer of Health for Huddersfield.

"Institutional Management of Young Infants," Dr. Eric L. Pritchard.

"Birth Rate and Empire," Dr. C. W. Saleeby.

"The Hygienic Value of the Village Institute in Denmark," Miss Smith Rossie.

"Fashions and Public Health," Dr. Jeannette S. Throckmorton, Lecturer in charge of Women's Work, State of Iowa.

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#### LEGAL MATTERS.

##### THE MENTAL NURSES' ASSOCIATION LTD., v. MISS MARY DOWNIE.

In the judgment in this case, given in the Bloomsbury County Court, by His Honour Judge Bray, to which we briefly referred last week, the Judge, after reviewing the evidence stated:—

"I give judgment for the defendant, but without costs . . .

"At the conclusion of the case I was asked by the Plaintiff's Counsel to give leave to appeal if I decided against them. If any intimation of an appeal had been given earlier in the case I should have made a fuller note of the evidence, and in particular of Miss Hastie's evidence. I only made a short note for my own use.

"I give leave to appeal."

We understand that the Mental Nurses' Association, Ltd., intend to appeal, and this matter will therefore be fought out in the High Courts.

#### APPOINTMENTS.

##### MATRON.

**Evelina Hospital for Children, Southwark, S.E.**—Miss M. Irene Lindars has been appointed Matron. She was trained at the Evelina Hospital, where she remained for four years, in the nursing of sick children. She then received four years' general training at the Westminster Hospital, after which she returned to the Evelina as Night Sister and was subsequently appointed successively Surgical Sister and Assistant Matron.

**Eastern Fever Hospital, Homerton.**—Miss Ethel Mary Worseldine has been appointed Matron. She was trained at the Southwark Infirmary, and has held the following posts under the Metropolitan Asylums Board. Charge Nurse, Brook Fever Hospital and Grove Hospital. Charge Nurse and Night-Superintendent, Joyce Green Fever and Smallpox Hospitals, for nine years. First Assistant Matron, River Hospitals, including six months as Matron in charge of the Orchard Hospital for eight years and ten months, making together close on twenty years' service and experience, which well qualifies her for promotion to the responsible position to which she has been appointed.

**Sheffield Street Hospital, London, W.C.**—Miss A. N. Timbrell, A.R.R.C. has been appointed Matron, subject to the assent of the Ministry of Health. Miss Timbrell was trained at Guy's Hospital, and has been Sister at a Government hospital on the Gold Coast, Matron of the Bangkok Nursing Home, Night Sister, Cumberland Infirmary, Matron, Lowestoft Nursing Association, and Matron, Lowestoft and North Suffolk Hospital.

**Kent County Asylum, Maidstone.**—Miss E. Macaulay, O.B.E., R.R.C., has been appointed Matron. She was trained at the Western Infirmary, Glasgow, and has since been Assistant Matron at Larbert Mental Hospital, one of the Matrons at Craig House Mental Hospital, Morningside, Edinburgh, and has served in Queen Alexandra's Imperial Military Nursing Service (Reserve) during the war.

##### ASSISTANT MATRON.

**Evelina Hospital for Children, Southwark, S.E.**—Miss Ethel Emly has been appointed Assistant Matron. She was trained at the East London Hospital for Children, Shadwell, and at Addenbrooke's Hospital, Cambridge. She was subsequently Sister-in-Charge of an Auxiliary Hospital in Ayrshire, and then returned to the Evelina Hospital as Night Sister, and six months later was transferred to the position of Out-patient Sister.

##### SISTER.

**Township Infirmary, Beckett Street, Leeds.**—Miss Catherine Jackson has been appointed Sister. She was trained at the Royal Infirmary, Manchester, and has been Sister at St. George's Military Hospital, Stockport, and has also had experience of private nursing.

##### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

##### TRANSFERS AND APPOINTMENTS.

Miss Kate E. Barlow has returned to Leeds (Central) as Superintendent. Miss Beatrice M. Johnson is appointed to the Isle of Wight C.N.A. as County Superintendent; Miss Martha K. Gibson to Norfolk N.F. as Assistant Superintendent; Miss Hetty M. Cochrane to East London; Miss Sarah Evans to Willington; Miss Annie Garton to Oakworth; Miss Eva F. Hodges to Rottingdean; Miss Harriet R. Howard to Worthing as Senior Nurse; Miss Charlotte L. Whyatt to Fulham; Miss Gladys N. Wide to Willington.

## BOOK OF THE WEEK.

## THE CHEATS.\*

Miss Bowen's genius is inexhaustible. Here we have yet another historical novel from her pen of the same high-water-mark of excellence, touched with the same vivid imagination, radiating local colour, and stamped with striking personalities.

Her central figure in "The Cheats" is the unacknowledged eldest son of Charles II—Jacques de Rohan.

Until the period at which the story opens he had been living in obscurity in Jersey, believing himself to be the nephew of a simple village clergyman, with whom he lived. But the old man to whom the history of Jacques was of course known, and who, it was asserted by some, had actually married the Royal youth in his early teens to Jacques' mother, had now received the King's commands to bring Jacques de Rohan to Whitehall.

Jacques was of notable appearance owing to his height and strength, and his remarkable face, which, coarse in line, in texture and colouring was yet pleasant. He had received few advantages in his Jersey home, and his introduction to Society filled him with bitterness at his shortcomings and his penniless condition, which he realised for the first time.

Added to this he at once fell in love with Eleanor, the daughter of Sir Miles Coningsby, as up to this point he was totally unaware of his relationship to the King.

Eleanor's treatment of him was the first step in his unhappy career. His obstinate nature clung to his love for her, though, truth to tell, there was little in her that merited a grand passion. But the young man was unsophisticated, and it was his first experience of a woman in her position. It was while smarting from her rebuff that he learned from the Jesuit, "Your mother was Mary Stewart of the Earls of Mar, a Lennox of Royal blood—the King married her."

The Jesuit makes clear to Jacques his present position and the King's ultimate wishes for him.

"By right you are the Prince of Wales."

"And in reality? A poor, penniless adventurer, nameless, a mirth, a jest—no, I do not thank you for your tale."

"The King will look after you."

"Five hundred a year in his secret service!"

"The King may acknowledge you."

"He would never dare to—why should he?"

Jacques informed the Jesuit—

"I am what the King has made of me. It is too late to make a prince of me, Father. I am what I was trained to be, a Jersey farmer. Tell me now—and have done with it."

"I am ready to do so. The King requires you to become a priest of the Roman Church."

To Jacques the limit of fantasy seemed reached, and he broke into an angry laugh. Further, he informed him that in due course, he was to be appointed Private Confessor to the King.

Inexperienced Jacques was as a puppet in the hands of the Jesuits, and every detail of his life henceforth was arranged for, or circumvented by them, as the case might be.

It was arranged that the fascinating Duke of Buckingham should alienate the affections of Eleanor Coningsby, so that when the unhappy Jacques, with his prospects of five hundred a year went again to press his suit, she met him with contemptuous disdain.

Jacques could see how it was done; how easily it had been done. The Duke had not even made love to her; he had only conveyed what his wooing could be. He had insinuated, suggested an ideal of a lover that had completely dazzled Eleanor. He was not young, he had lost his always coarse good looks, yet he had been able to lead this girl's fancy exactly where he wished.

"Jacques was sick of it all; tired and disgusted on this perfect day of early spring." Caught in the toils, it was useless to struggle to escape from his fate, or from the powerful influence of the Pope, and all who are acquainted with the history of those times will remember the secret submission of the King to the Roman Church, and his perilous position, in consequence.

Jacques' interview while in Italy, and training as a Jesuit with the ex-Queen of Sweden, Cristina, is an interesting episode.

"She was perhaps the most illustrious convert ever made by the Church of Rome, the woman who had given up her throne for the faith." She is described as having cold features, and hawk nose, which were framed in a brown wig of thick curls, like a masculine peruke; and the rest of her costume, cravat, waistcoat, coat, were shaped like a man's attire. After hearing his story she said:

"Of course there was a marriage, and of course you cannot prove it. It will spoil your life," she added.

"There was very little to spoil," returned Jacques grimly.

"You are a fine young man," returned the Queen coolly. "You ought not to speak so cynically."

"I have been cheated. Everyone whom I have met has been a cheat."

"And you, yourself, are you not also a cheat, James Stewart?"

The young man flushed.

"You are a priest with no priestly thought in your mind. You have taken orders from merely ambitious motives."

"No," he disclaimed, his motives were revenge.

"On whom?"

"On the cheats."

"On your father?"

"Yes."

We have no space but to give the bare outline of this story, but we think it is enough to show the great possibilities of the romance of which it is needless to say, full advantage has been taken. The study of the Stuart period is bound to be fascinating, and its religious intrigues, its

\* By Marjorie Bowen. (Collins & Sons, Ltd.)



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

*The*  
**Boots**  
*Chemists*

**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

lawless loves, its thrilling adventure, all find a place in this notable book.

We are sure that our readers will not rest till they find out for themselves what place the unhappy Jacques eventually found in the world that had treated him so ill.

H. H.

### LEAVE THE THREADS WITH GOD.

Spin cheerfully,  
Not tearfully,  
Though wearily you plod.  
Spin carefully,  
Spin prayerfully,  
But leave the threads with God.

ANON.

### THE NATIONAL HEALTH.

#### CONFERENCE ON 'THE PREVENTION OF DISEASES OF THE TEETH.

Not only will the subjects at the Manchester Conference on the Prevention of Diseases of the Teeth on May 13th, 14th and 15th, be popularly treated, but several will have lantern illustrations. Another feature will be an exhibition. This will illustrate the development of the teeth and jaws from the earliest years up to adult age, with notes regarding the appropriate food at different ages, specimens of perfect mouths, models of teeth in health and disease, suitable for teaching, others showing the result of exercise in promoting growth of bone, examples of sound but worn dentures, showing the effect of hard use upon teeth, illustrated by an Egyptian skull; and last, but not least, in painful interest for so many, specimens illustrating the ravages of pyorrhoea.

Programme, with full particulars, may be had by sending a halfpenny stamp to the Food Education Society, 265, Strand, W.C. 2.

#### COMING EVENTS.

*May 7th.*—St. Paul's Hospital, 13A, Red Lion Square, Holborn, W.C.: First of a Course of free Lectures to Nurses and members of the Allied Professions, on "Venereal Diseases," by Mr. Leonard Myer, F.R.C.S. 5 p.m.

*May 8th.*—Fever Nurses' Association. Annual Meeting, Croydon Town Hall. Dr. R. Veitch Clark, President elect, will deliver an address. 2.30 p.m. Tea by kindness of Mayor and Corporation, Croydon Fever Hospital.

*May 8th.*—Presentation of Address to Mrs. Bedford Fenwick by Deputation of Matrons and Nurses, 20, Upper Wimpole Street, London, W. 4.30 p.m.

*May 10th.*—General Nursing Council (Scotland) Meeting. Scottish Board of Health, Edinburgh. 11.45 a.m.

*May 12th.*—Centenary of the Birth of Florence Nightingale. 1820-1920.

*May 13th, 14th and 15th.*—Food Education Society. United Kingdom Conference on "The Prevention of Diseases of the Teeth." Albert Hall, Manchester.

### LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

#### FOR AND AGAINST THE USE OF PROPHYLACTIC PACKETS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The subject of prophylaxis will be argued from a false premise if the statement be accepted that legislation is for the man who has refused sex-training.

In a wide experience amongst all classes—and I have no reason to consider it exceptional—I have found the proportion of parents who give their children scientific sex teaching exceedingly small. Many parents consider they have performed their duty in this matter. I happen to have heard later the comments thereon of both boys and girls. So vague was the teaching that the child could not imagine what the parent was driving at.

The real difficulty is that few parents themselves regard the sex question aright; until they do, any attempt at instructing others must prove a failure. Over sixty years ago Kingsley expounded the only reverent view of sex relations. We are now emerging from the Age of the Animal-man into the Age of the Human-man, and this progress will necessitate ruthless revision of many social questions.

Miss Evans is not hopeful as to the results of sex teaching half a century hence.

Is the sin of indulging the sexual appetite more calamitous in its effects than the indulgence of any other appetite? Look at the physical havoc wrought—unto the fourth generation—by the drunkard and the excessive smoker. Who can number the homes wrecked through gluttony alone? Yet when these victims of their own selfish desires throng to our hospitals for alleviation we are deliberately blind to all but their distress and their dire need.

I am, Madam,

Yours faithfully,

MENA M. G. BIELBY.

Cranford, Middlesex.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—I quite agree with Miss E. C. Evans' views as expressed in THE BRITISH JOURNAL OF NURSING of May 1st. "Prevention" is the keynote of the age, and any preventative to disease must be seriously considered, but must be equally negated if at the same time it would tend to increase moral laxity, as I freely believe the free distribution of prophylactic packets would.

We women have the vote, and there are certain things we ought to and can do:—

1. Insist on early and full instruction of the young at home and in schools.
2. Train public opinion to regard chastity in man as essential and possible as chastity in woman.

3. To disabuse the public mind of the idea that "sowing wild oats" is to be regarded as distemper in the puppy—a necessary evil, the sooner over the better.

4. To insist on notification and a heavy fine for failure to comply with the regulation, or to seek treatment.

5. A severe punishment for infecting another person, or, as this might be difficult to prove, for any connection taking place before the infected person was certified free from infection.

The medical profession (male portion) have sacrificed everything to secrecy. I have known members of families exposed to infection because to warn them for their safety might have involved the so-called "honour" of the head of the family or involved the medical attendant in a libel suit. Again, an eminent medical man lately voiced the opinion "that you could not expect the same moral code from men as women!" If not, why not? We must! The fact that notification was compulsory would in itself deter many and save not a few families. It is curious how much evil is averted when the evil-doer knows his deeds will be made public. I am, &c.,

J. B. N. PATERSON.

#### BUMBLEDOM IN BERMONDSEY.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I beg to call your attention to the following advertisement in the *Hospital* of April 24th:—

(Copy.)

"BOROUGH OF BERMONDSEY.

Applications are invited for the appointment of two Midwives.

Salary, £220, rising by annual increments of £10 to £250 per annum.

The persons selected are to provide and wear, when on duty, a nurse's uniform, to be approved by the Public Health Committee.

Candidates are to hold the certificate of the Central Midwives Board, be registered Midwives, and will be required to belong to a Trade Union," &c.

Surely a Midwife has every right to belong or not to a trade union, as she wishes. It is the affair of the Council that she be well and fully-trained, and that she will act to the best interest of the mothers and babies, but are not her political and industrial views purely her own concern?

I should be glad to know what readers of THE BRITISH JOURNAL OF NURSING think of the above stipulation.

Yours faithfully,

THEODORA HARRIS.

180, Uttoxeter Old Road, Derby.

[We strongly disapprove of compulsion by employers of nurses and midwives, especially by those who administer the rates, or charitable funds. What right has a Public Health Committee to compel a midwife to wear "nurse's uniform"? We find a smack of "Bumble" in this most objectionable advertisement and should like to hear the opinion of our readers on its provisions.—ED.]

#### KERNELS FROM CORRESPONDENCE.

##### "LIVING OUT."

*One of the New Generation.*—"I gather you are not in favour of the 'living out' system for hospital nurses and probationers. May I enquire why? When I give reasons in opposition to it, I am described as 'a back number,' 'moth eaten,' and otherwise out of date."

[We are opposed to the "living out" system for the simple reason that it tends to disorganize the routine necessary for the efficient nursing of the patients. We are also of the opinion that irresponsible persons have no right to administer hospitals for the sick unless they conform to regulations providing for the healthy housing of the resident medical staff and the nursing and domestic staffs, and that all such institutions should be inspected by experts. We feel sure the hospitals themselves would benefit by publicity, as their work when well organized is absolutely indispensable to the community.—ED.]

##### WHO'S WHO.

*Miss Mary Travers (London).*—"B.J.N. splended this week. "'Who's Who' on the General Nursing Council" just what the nurses wanted to know. Every nurse who intends to register (and no doubt we all do) should have a copy. I congratulate myself that you are there to help to make our rules. We know we shan't be let down."

*Miss Grace Harvey, Liverpool.*—"Glad to see Liverpool has a Matron on the Nursing Council. A great honour and a great responsibility. Am not quite sure we deserved it, as a city we did little to support legal status for nurses in the past—indeed, for long we opposed it."

[Now that the great victory is won, Liverpool must help to make nursing the fine profession it should be. Unity and *esprit de corps* must be our watch words in the future.—ED.]

##### OUR OWN CHILDREN.

*Military Nurse.*—"Those of us who worked for months in the devastated districts in France heartily welcome your remarks concerning the 'Save the Children Fund.' It is outrageous—bringing German children to England. Help them if need be, but keep them in their own country. All this silly, sentimental 'tosh,' encouraged by persons who presumably kept safely in England during the war (to judge from the names of Patrons), has naturally aroused strong feelings in France. No wonder. Moreover, I note the Waifs and Strays Society have a heavy overdraft through feeding, clothing, sheltering and training 4,531 of our own children; and the Fresh Air Fund is very poorly supported. Charity begins at home."

##### OUR PRIZE COMPETITIONS.

###### QUESTIONS.

*May 8th.*—Prescribe a diet for a case of diabetes. Give a warning of what to avoid. Outline diet for cases of (a) Pneumonia; (b) Nephritis.

*May 15th.*—What are the symptoms of the presence of adenoids and diseased tonsils in a child? What ill results may follow their neglect?

# The Midwife.

## THE CARE OF MATERNITY.

In the House of Commons on Wednesday, April 28th, Mr. Briant asked the Minister of Health the number of practising certified midwives in the United Kingdom and the approximate number required for the proper care of maternity cases; and what steps, if any, does the Ministry propose to take in order to secure that an adequate supply of midwives shall be available?

Dr. Addison: As the answer is somewhat lengthy I propose to circulate it in the Official Report.

The following is the answer supplied:

According to the last report of the Central Midwives Board, the number of women entitled to practise as midwives on March 31st, 1919, was 44,166, but the number who gave notice of their intention to practise in 1918 was only 11,298.

No useful estimate can be made of the total number of midwives required. The shortage which exists in some districts is due to the fact that the number of cases within reach is too small to enable a midwife practising independently to make a living.

The Ministry have continued the policy of the Local Government Board of urging local authorities and nursing associations to subsidise midwifery in the more scattered districts, and of paying grants in respect of such subsidies. By this means the proportion of the rural population served by trained midwives has increased since 1917 from 51 per cent. to 65 per cent., and steady progress is being made. Nearly all the county councils and county nursing associations have framed schemes for extending the midwifery service of their counties.

A number of local authorities in urban areas have also, with the assistance of the Ministry, subsidised the provision of trained midwives in parts of their districts in need of this service.

A grant in aid of the training of women as midwives has been authorised and is being administered by my right hon. Friend the President of the Board of Education.

## PENAL CASES.

A special meeting of the Central Midwives' Board was held at 1, Queen Anne's Gate Building, Westminster, on Wednesday, April 21st, when the charges were heard against seven midwives.

*Struck off the Roll and Certificates Cancelled:* Midwife Annie Christopher (No. 3973); Midwife Eliza Days (No. 219); Midwife Elizabeth Evans (No. 17009); Midwife Priscilla Hames (No. 14882); Midwife Lary Ann Murphy (No. 31944).

*Sentence Postponed. Report asked for from L.S.A. in three and six months' time:* Midwife Jane Eliza Carr (No. 10458); Midwife Eliza Jane Hadley (No. 13683).

## EAST-END MOTHERS' LYING-IN HOME.

The Annual Report of the East End Mothers' Home 396, Commercial Rd., E. is a very human document. The income, both in training fees, and patients' payments increased during the year, but this was counter-balanced by the increase in expenditure owing to the very high prices ruling for everything, so that the net result of the year's finance was the same as the previous year.

In 1919, 1,881 mothers were delivered in the Home and district, 363 in excess of the previous year, 200 mothers had regretfully to be told that there was no room, although their circumstances made them more than eligible for such help. "Notwithstanding," says Miss Anderson, the Resident Lady Superintendent in her report, "we have been terribly crowded, and extra bedsteads had to be put up, but every mother had a comfortable warm bed, a kind nurse, and plenty to eat. It seemed beds, beds, nothing but beds, babies and mothers, yet all were happy, and enjoyed the picnic.

We are booking now with the greatest caution, but, as the poor dears never know their dates, it is a difficult matter to arrange the admissions. It is heart breaking to refuse mothers which we are compelled to do now daily, to avoid the danger of overcrowding. Fortunately our Sisters have been with us so long, and are so entirely to be relied upon, that the germ of sepsis has for us no terrors, and the result shows that our trust is not misplaced."

Miss Anderson gives some examples of the increase in prices. Lint, formerly 1s., now 5s. per lb. Nurses' uniform material, formerly 7½d. yard, now 2s. 9d. for the same quality.

"The domestic servant problem," says the Lady Superintendent, "beggars words; but I suppose we have been fairly fortunate as a whole, although one girl's equipment for domestic service when she arrived was the clothes she wore, a comb, a powder pot, and curling pins!! Yet she had been earning £2 10s. a week in a factory."

## CHARGE AGAINST A MIDWIFE.

A midwife named Alice Gardner, of Bath, was last week charged at Reading with abandoning a baby by leaving it under a tree in St. Peter's Avenue, Caversham.

The child was born in the Bath Workhouse, and it is alleged was handed to the midwife that she might take it somewhere for adoption.

As we go to press, the Annual Meeting of the British Hospital for Mothers and Babies, and Council for the Promotion of the Higher Training of Midwives, at which Princess Christian has consented to preside, is being held in the Great Hall of St Bartholomew's Hospital.



# THE BRITISH JOURNAL OF NURSING

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Vol. LXIV

## EDITORIAL.

### LOOKING FORWARD.

On Monday last the General Nursing Council for Scotland held its first meeting in Edinburgh, and on Tuesday the General Nursing Council for England and Wales met at the Ministry of Health, Whitehall, London—red letter days indeed, not only in the history of the Profession of Nursing in the United Kingdom, but also for the community, the members of which, both rich and poor, are dependent in sickness upon the services of trained nurses.

Up to the present time no standard has been defined to which trained nurses must attain. By common consent the principal training schools have enforced a 'three or four years' term of training, but the standards vary in each hospital and infirmary.

Now this is of the past. Parliament has assigned to the General Nursing Councils established in the three countries, the duty of enforcing standards of nursing education and maintaining discipline amongst registered nurses, and, after a period of grace, every such nurse will be required to attain the professional standard defined by these Councils. To these Councils, also, the registered nurses will look to safeguard the honour and maintain the ideals of their profession. A great honour, and a great responsibility have been placed upon those nurses who have been selected from among many thousands of their colleagues to draft the rules and define the standards of nursing education of a great profession. It will be their duty and privilege to raise high ideals, not only on the technical side, but of earnestness, devotion to the sick, self-sacrifice, and moral courage (a much rarer

virtue than personal courage, in which nurses have never been lacking). Throughout the centuries men and women of the highest personal character have brought to the service of suffering humanity a wealth of devotion which has been of extreme value, though their knowledge in many instances has not been great. Science has taught us that knowledge must be exact and precise if it is to be of the greatest value; that no pains should be counted too great to attain it.

But a nurse needs much more than exact science. She needs knowledge of human nature—the deeper the better—and should study the problems of the day in a broad, tolerant, and sympathetic spirit. She needs tenderness in her relations with the sick, a knowledge of those things which tend to the healing of the mind, and of the manner in which the mental outlook of her patients may retard, or assist, their bodily ailments.

Again, she needs to cultivate those personal qualities which will inspire confidence and restfulness. There are nurses who radiate an atmosphere of comfort and strength, from whom the sick seem to absorb vitality, and an important part of the training of probationers is the inculcation of ethical standards and the cultivation of those qualities which will make them valued members of their profession from the personal standpoint.

The General Nursing Councils can do much to foster these ideals, and also to reveal the nursing profession to the young womanhood of the nation as the highest and most honourable, if one of the most exacting professions, which they can enter.

It is by an appeal to high and generous qualities that the right type of probationers will be attracted.

## OUR PRIZE COMPETITION.

**PRESCRIBE A DIET FOR A CASE OF DIABETES. GIVE A WARNING OF WHAT TO AVOID. OUTLINE DIET FOR CASES OF (a) PNEUMONIA; (b) NEPHRITIS.**

We have pleasure in awarding the prize this week to Miss S. F. Rossiter, Sisters' Quarters, Royal Naval Hospital, Chatham.

### PRIZE PAPER.

The first essential factor in dieting is a knowledge of what to avoid.

The second consideration is proper regard to the nature, condition, and previous dieting habits of the patient, therefore it will be seen that whereas standard diets may be successfully used for the average patient, modifications must be adopted to suit the individual.

In *diabetes mellitus* the object of diet is the elimination of carbo-hydrates; this, however, must not be done too suddenly, as the condition of *acidosis* may arise. The following diet is, therefore, subject to modification:—

#### 1st and 2nd day.

Cabbage or Spinach, 10 ozs.  
Eggs, cooked in various forms, 5 ozs.  
Tomato, Lettuce, or Watercress, 2 ozs.  
Butter, 4 ozs.  
Tea and Coffee, without Sugar  
or Milk  
Water and Lemonade  
Bovril or Beef Essence

ad lib.

Containing Carbo-  
hydrates, 12 grms.

#### 3rd and 4th day.

Add Fish, 4 ozs.

#### 5th and 6th day.

Add Bacon, 2 ozs.  
Less Eggs, 1 oz.

#### 7th and 8th day.

Omit Fish.  
Add Meat, 4 ozs.

#### 9th and 10th day.

Add Ham, 2 ozs.

Repeat Fish, 4 ozs.

Omit Eggs, 1 oz.

Omit Meat, 4 ozs.

#### 11th and 12th day.

Add Sardines, 2 ozs.

Omit Eggs, 1 oz.

#### 13th and 14th day.

Omit all solids.

Tea, Bovril, Coffee, ) ad  
Lemonade, Water, ) lib.

Saccharine or glucose may be used for sweetening. From the above it will be seen that the diet is varied daily, and extends over fourteen days; after the first two days it is practically carbo-hydrate free. To modify this "Casord" bread and small quantity of milk may be added. Whisky is often given during the last two days of diet, particularly if patient has been used to alcohol.

In *pneumonia* the aim of the diet is to minimise exertion in digestion, and thus indirectly upon the heart, and to avoid heat-producing elements, at the same time giving the maximum of nourishment possible. The ideal diet is, therefore, milk, given regularly in small quantities during the febrile stage, but although

ideal as a food, it can become almost nauseating to the patient unless the manner in which it is served be varied. This can be done as follows, giving five ounces two-hourly:—

Milk Tea, freshly made and not allowed to stand. Milk, with half a well-beaten egg, flavoured with sugar, and some flavouring essence added.

Junket, to which lemon rind or nutmeg has been added.

Milk Jelly, made with Isinglass

Milk, to which a little coffee has been added, although this must not be given as a night feed.

Milk, with small quantity of beef extract and little salt. This is only as an occasional feed, as the concentrated meat extracts tend to increase blood pressure.

Milk, iced, with soda water.

If brandy is ordered as a stimulant it should never be given in feeds, first because its action as a stimulant is lost when given so dilute; secondly, it often prejudices a patient against feeds; and, lastly, one is not always certain that the whole of a feed will be taken, and it is so essential that the prescribed amount of brandy should be taken. *Mist Pot Citrate*, in the proportion of 3i to Oi of milk makes the milk easier to digest by forming lighter, softer curds; it is also slightly diaphoretic in its action.

It must always be remembered that the daintiest feed will be spoiled if the mouth is not carefully attended to beforehand.

During convalescence the diet may be a liberal one (providing it is of a light nature) to repair the ravages of continued high temperature upon the tissues.

In *nephritis*, during the acute stage, the chief object is to keep up metabolism, whilst avoiding strictly any article of diet that increases blood pressure and causes irritation of renal tract. Demulcent drinks given freely—e.g., barley water, will be found to supply sufficient nourishment. Honey given in small quantities is a palatable form of administering glucose, and is nourishing and easily assimilated. If there are no gastric symptoms cream may be given. During convalescence, or in the chronic type, milk puddings, eggs in various forms, white meats (e.g., chicken, &c.) may be given.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Jean M. Scott, Miss M. Cullen, Miss Winifred M. Appleton, Miss M. A. E. Smith, Miss A. Overshott.

### QUESTION FOR NEXT WEEK.

What are the symptoms of the presence of adenoids and diseased tonsils in a child? What ill-results may follow their neglect?

## NURSING ECHOES.

Miss Beatrice Cutler says farewell to "Barts" next week, after many years' devoted service there, and her colleagues sincerely deplore her departure. At the summer meeting of the League an expression of their regard for her is to take a practical form, when a presentation will be made to her on her retirement as Hon. General Secretary to the League. This snapshot shows Miss Cutler with her pet guinea-pig—a very intelligent little person.

We hope that all members of the Society for the State Registration of Trained Nurses will note that the Annual Meeting this year will be held at 11, Chandos Street, Cavendish Square, W., on May 28th, at 4 p.m. It will be a memorable occasion, inasmuch as (1) the object which the Society was founded eighteen years ago to carry out has been achieved, and (2) the meeting will be asked to decide what shall be the future work of the Society.

We are surprised at no licence of the imagination where the Nation's Fund for Nurses' Appeal is concerned. Miss C. May Beeman, as a professional collector of charity funds, may be in ignorance, but in a letter signed by her conjointly with Dame Becher, R.R.C., asking for one million shillings (£50,000) the latter subscribes to the astounding statement that "after the Crimean war Florence Nightingale collected a large sum of money, and endowed the Nightingale School at St. Thomas' Hospital." Miss Nightingale never appealed for a penny for any such purpose, but when a monetary gift was offered to her she accepted on the condition that she should decide what

use should be made of it. This was agreed by those who collected the Fund, and the Nightingale School for Nurses was founded, with Miss Nightingale's nephew as Secretary, a post he and his son have held between them for some sixty years.

This appeal is made entirely in the name of necessitous nurses, with no mention whatever of the College of Nursing, Ltd., which so far has received the bulk of the money as an Endowment Fund.

The appeal has now lasted two and a half years, and no accounts or balance-sheet have been made public. Why this hole-and-corner finance? Every nurse in the kingdom whose profession has been disturbed by this appeal has a right to know what is being done with the money raised in her name.

We heard recently of an Army nurse, whose health suffered on active service, after an operation being recommended six months' rest. She appealed to the Nation's Fund for help. The help she received was *two pounds*, and the offer of a letter for three weeks' visit to one of the Edith Cavell Homes, which are not financed by the Nation's Fund. What the nurses want to know is, How much of the fund has been given to the sick nurses who have all along been the chief item of appeal, and

how much to the College of Nursing, Ltd., general fund.

"Salve atque Vale!" writes from Ward S 2 C, Royal Infirmary, Manchester, to the *Manchester Guardian*, on Anzac Day:—"May I put in a plea for the nurses at this institution? They are paid approximately as follows:—First year, £22; second year, £26; third year, £30; fourth year, £50-£60 as staff nurses or



MISS BEATRICE CUTLER.

sisters. They work twelve hours per day, and get a whole day off once in each four weeks when possible. While here I have seen nurses, footsore and weary through being on their feet all day, refuse to go off at supper-time in order that they might give attention to two or three very sick patients. One can't buy such devotion. Of course, the hospital authorities are not to blame. They, no doubt, do the best they can with the money at their disposal. It is, I presume, a case of almost universal ignorance, but it is time the community took the welfare of its nurses into its own hands."

We wonder if this accusation of overwork is true. As ardent supporters of the College of Nursing, Ltd., the officials of the R.M.I. have surely adopted the 48-hour week recommended to others.

There has recently been grave distress in the Isle of St. Kilda, one of the Hebrides group—a graphic account of which is given by the captain of the trawler "Active," acting as mail boat between Aberdeen and St. Kilda:—"Out of the sparse population of some eighty islanders, sixty were prostrated with influenza. All work in the island—the tending of sheep flocks, the spinning of wool, and fishing—is at a complete standstill, but fortunately the supplies of foodstuffs landed by the 'Active' have now alleviated the starvation which for a time threatened the people of St. Kilda. There is, however, a lamentable dearth of medical skill and medicines for those stricken with illness. With commendable zeal Nurse Mackenzie, a Glasgow lady, has taken residence on the island, and the skipper reports that, although she is almost 'worked off her feet,' she is unable, owing to the lack of medical supplies, to cope adequately with the epidemic.

"During the war," says the *Times*, "the cable from the island to the mainland was destroyed by submarines, and at present the only medium of communication possessed by the islanders is through the trawler 'Active.'"

In view of the serious nature of the outbreak, Dr. Shearer, one of the Medical Officers of the Scottish Board of Health, left Edinburgh to join the boat, which probably arrived nearly three weeks after Nurse Mackenzie's first message intimating the outbreak and asking for stores.

It is fortunate that neither the Highlands and Islands Medical Service Board, nor the Scottish Board of Health, have had, says the Board, difficulty in finding highly trained and capable nurses willing to undertake the responsibility of serving in this lonely post.

## PRESENTATION TO MRS. BEDFORD FENWICK.

### ADDRESS OF THANKS.

On Saturday, May 8th, some fifty friends and colleagues of Mrs. Bedford Fenwick assembled at 20, Upper Wimpole Street, to present to her an Address of Thanks for her long years of arduous work for the organisation of the nursing profession by the State, to congratulate her on its success, and to ask her acceptance of a cheque "to be expended for her own use and pleasure," as well as of the History of St. Bartholomew's Hospital—by Sir Norman Moore—where she had so honourable and distinguished a career as Matron and Superintendent of Nursing. The illuminated frontispiece of this was inscribed:—

"Presented to Mrs. Bedford Fenwick by some of her friends, in grateful acknowledgment of her life's work for the organisation of nurses, and especially for securing the State Registration of nurses in the United Kingdom. They congratulate her on its successful accomplishment, December, 23rd, 1919."

The house was filled with beautiful flowers—lilies, roses, azaleas, tulips, iris, lilac, blue and white hyacinths—a perfect blaze of colour; many sent up from the country by friends unable to be present, and much admiration was expressed for the lovely old Chinese and English porcelain, of which Mrs. Fenwick is a keen collector and connoisseur, *famille rose*, armorial, soft paste Lowestoft, Worcester, and apple-green Rockingham, and other choice specimens, the collection of which has been the one recreation which Mrs. Fenwick has enjoyed during her forty years' strenuous professional work.

### THE PRESENTATION.

The presentation was made by Miss Mildred Heather-Bigg, R.R.C., a keen supporter of State Registration of nurses and most loyal of friends. On her right was Mrs. Bedford Fenwick and on her left Dr. Bedford Fenwick.

On rising to make the presentation, Miss Heather-Bigg said those present had assembled on a most inspiring and momentous occasion, the memory of which they would always cherish. In that room thirty-two years ago the movement for the State Registration of trained nurses was initiated by Mrs. Bedford Fenwick. To-day its triumph was assured, the victory won, and they were there to rejoice with her that the State Registration of trained nurses was an established fact. In the course of the long campaign there had been

innumerable difficulties, but Mrs. Fenwick never wavered, and her wise generalship had brought the movement to a triumphant conclusion, on which they cordially congratulated her and themselves.

#### THE ADDRESS.

Miss Heather-Bigg then read the following address, which, illuminated on vellum by Mr. Henry W. Donald, the distinguished illuminator and designer, will form a permanent and artistic heirloom, which will, no doubt, be highly prized by generations to come.

#### ADDRESS OF THANKS PRESENTED TO MRS. BEDFORD FENWICK,

MAY 8th, 1920.

ON THE OCCASION OF HER APPOINTMENT AS A  
MEMBER OF THE GENERAL NURSING COUNCIL  
FOR ENGLAND AND WALES.

We, your friends, pupils, and co-workers, desire to express to you, with affectionate regard, our deep admiration and grateful appreciation for your life's work for the organisation and higher education of trained nurses, and at the same time to ask you to accept the accompanying cheque, which we hope you will expend for your own use and pleasure.

We realise that it is impossible to express how far-reaching is the influence you have exercised throughout the world by your pioneer efforts for all that concerns the professional welfare and advancement of trained nurses, or how stimulating an inspiration your constructive genius has been to your colleagues in other countries striving for the same ideals.

It is owing to your far-sighted vision that the inestimable benefit of a professional voice in the press has been secured to trained nurses through the *BRITISH JOURNAL OF NURSING*. Through your unceasing and self-denying labours as Hon. Editor for twenty-seven years, during which your great talents have been freely devoted to your profession, the demand for the State Registration of Nurses, which you have so fearlessly voiced, has found general acceptance not only in the United Kingdom, but throughout the world wherever trained nursing is organised; a tribute to your high courage, endurance, skill, and unflinching devotion to the highest ideals of the nursing profession, which is the best recognition they could receive.

In originally assuming the financial responsibility for the *BRITISH JOURNAL OF NURSING* (then the *NURSING RECORD*) we are conscious that you had the active assistance of Dr. Bedford Fenwick, and we realise how much nurses owe to him for his generous support of their cause.

Your work for State Registration of Nurses and your onerous duties as Hon. Editor of the *BRITISH JOURNAL OF NURSING*, are only a part of your many-sided activities, they are too many to enumerate, but mention must be made of the International Council of Nurses founded by you in 1899, which has done so much to consolidate and uplift trained nurses throughout the world and to broaden their professional outlook. It has cemented international friendship and has been a source of deep happiness and profit through the International Congresses held in various countries, to many thousands of nurses.

We have been deeply gratified to learn that your successful work to secure legislation for nurses, which will enable them to develop their profession on self-supporting and self-governing lines, has been consummated by your appointment by the Minister of Health on the first General Nursing Council which will administer the Nurses Registration Act in England and Wales.

Although this will impose further work upon you at a time when you might reasonably lessen your arduous labours, we can assure you that your presence on the Council has given unqualified satisfaction to numbers of nurses, and is felt by them to be a guarantee that their best interests will be well conserved during the important period in which the rules of the future government of their profession are considered before receiving the sanction of Parliament.

May you have many years of enjoyment of victory for the cause of political, economic, and professional enfranchisement.

Signed on behalf of the subscribers,

MILDRED HEATHER-BIGG, R.R.C.

Miss Heather-Bigg then said that the subscribers also wished to thank Dr. Bedford Fenwick for his many years of unseen, unostentatious, but invaluable work for nurses. She asked, on their behalf, his acceptance of a gold fountain pen, on which the following words were inscribed:—"Dr. Bedford Fenwick.—In grateful appreciation of his work for nurses. May, 1920." She thanked him for the many times that he had used his pen on their behalf in the past, and expressed the hope that he would continue to do so in the future.

Mrs. Fenwick, who, on rising, was warmly applauded, addressing Miss Heather-Bigg, and her "old and faithful friends," expressed her warm appreciation of the gifts presented to her, and said no general (A Voice: Field-Marshal) could go further than his backing; if she had not been so splendidly supported by such wonderful people for thirty-two years

she would not have been able to accomplish what had been done. Thirty-two years was not long to look back upon, but it was a long time to go on fighting uphill for a righteous cause, opposed at every step by a powerful and self-interested opposition. It was the conscientious convictions and splendid help of a few which were at the back of the present victory.

Miss Heather-Bigg had referred to the occasion thirty-two years ago when a few matrons met together at 20, Upper Wimpole Street, to discuss the future organisation of the Nursing Profession and to found the British Nurses' Association. She held in her hand the manuscript of her opening speech made on December 10th, 1887, to some thirty matrons there assembled, and by special request read it to those present.

#### ADDRESS OF MRS. BEDFORD FENWICK TO HOSPITAL MATRONS, DECEMBER 10, 1887.

LADIES,—I think you will agree with me when I state, that it is a feeling of universal fellowship and love, the desire to extend aid to the helpless which forms the key-note of the Nursing Profession, and that it is strange that the members of a Profession with such aims and objects, should be among themselves so disunited and forgetful of the obligations they owe to one another.

The further development of the Profession is cramped by a system of selfish isolation. The majority of those women who have been placed in prominent positions, as the Matrons of large hospitals, or the Superintendents of Nursing Schools, have until lately failed to see, that however well they may discharge the duties they owe to the individual sphere in which they are placed, their position still obliges them to accept another and great duty, and that in their hands alone must and should rest the furtherance of the Nursing Profession as a whole, that they can no more with honour refuse to accept that responsibility than they can refuse to perform the immediate duties of their offices.

Those who by their talents and good fortune have attained to higher and more influential positions in the nursing world, are bound by that very circumstance, not only to exercise their kindly influence for the benefit of those who are under their immediate care, but to further as far as possible throughout the members of the Nursing Profession goodwill and love, and that strength which is born of unity.

The Profession of Nursing is now composed of thousands of aimless atoms, who have no recognised status, and no guardians of their interests, and unlike other professions, are with few exceptions, as a *common body*, absolutely without *esprit de corps*. Nurses have, as a rule, strong individual affection for the hospital where they were trained, and much unity often exists among its members, but they have none of that wider

and broader sympathy, that embraces every woman, who, however and wherever, is devoting her life to the care of the sick.

To meet this want for a bond of unity and protection, and to extend to its utmost the sympathy that should exist among all nurses, it is proposed to found a British Nurses' Association, the pith of whose aim and objects is, to benefit every individual member of the Nursing Profession, by raising and firmly establishing the standard of the Nursing Profession as a whole. This can only be done by the united effort of the nurses themselves, they now form such a large and influential body, that it is most necessary for them, in fact I should say distinctly detrimental to their interests to attach themselves to any other Association. They only require the kindly support of the medical profession to be able to form among themselves, and for themselves, by combination and self-help, an Association which will be able to support and protect their interests.

Before discussion is invited as to the desirability of forming such an Association, I should like to touch upon one of the principal objects, that is the Registration of Nurses. I mention this subject specially because I am deeply interested—I may say concerned—about it, because it is of *vital* importance to you one and all, and because it has already been taken up by a heterogeneous Association\*, which offers to register nurses "after one year's training only—at 2s. 6d. a head." Nurses can avail themselves of this questionable privilege at any registry office in the United Kingdom!

Now I state most emphatically that this scheme cannot be too severely condemned. It is derogatory in the highest degree to the Nursing Profession, calculated to bring discredit and ridicule upon its projectors, and eminently unfair towards an ignorant and credulous public.

In my opinion Registration, to be of any value at all, must be undertaken by a legally recognised body, largely composed of the heads of the Nursing Profession themselves, with the full concurrence of medical men. We must recognise the fact that Registration is only the lever to that high, irreproachable position to which all nurses should aspire, and if unanimous can easily attain. The time has come when this great movement is to be publicly discussed, and I call upon you ladies present, representing as you do by virtue of your office the leaders of the great army of nurses, to rise up and protect them and guard their interests with that determination and zeal which springs alone from knowledge.

You have a great and bounden duty to perform from which no argument should deter you.

Mrs. Fenwick said she was glad that in the Address mention had been made of the BRITISH JOURNAL OF NURSING, because they would never have got their principles inserted in the Registration Acts without it. The nurses had

\* The Hospitals Association founded by Mr. Henry C. Burdett, Financial Secretary of the Share and Loan Department of the Stock Exchange, later Sir Henry Burdett.



not had one generous supporter in the Press; if they had not had their own independent organ they would not have been able to put forward the professional nurses' point of view. Its educative influence had been incalculable throughout the world in the past, as she hoped it would continue to be in the future.

Mrs. Fenwick spoke of the great work for registration of the late Miss Isla Stewart, and the consistent, steady support of Miss Heather-Bigg. She endorsed what had been said in the Address of the help given by Dr. Bedford Fenwick, and referred with pleasure to the fact that the nurses of the world had adopted the programme of the *BRITISH JOURNAL OF NURSING*. The nurses had their professional organ in every civilised country, and upwards of fifty Acts for the Registration of Nurses were now in force. It was a tremendous thing that the Nurses' Registration Acts in the United Kingdom embodied all the great principles for which the organised nurses had contended. She was going to the General Nursing Council to represent the Nursing Profession as a whole, and to work for it to the best of her ability, and hoped all the nurse members would do the same. Concluding, she thanked the donors for their kind words and generous gifts, which she valued more than words could express.

Dr. Bedford Fenwick also expressed his thanks for the useful gift presented to him, which he should value highly and use constantly. It was particularly appropriate, as he had written much in support of the registration cause in the past, and had for fourteen years edited a medical paper, which had educated medical opinion on nurses' registration, and done much to secure the appointment by the Government of a Select Committee to inquire into the expediency of the State Registration of Nurses, and to get a unanimous vote in favour of such a measure. He hoped to use the pen, for which he sincerely thanked the donors, for the nurses' cause in the future.

Dr. Fenwick spoke of the disappointment felt by Mrs. Fenwick and himself that Miss A. M. Bushby was prevented by indisposition from being present, a disappointment he felt sure was shared by those present. He proposed that a message to this effect should be sent to her, which was cordially agreed.

#### TOUS NOS HOMMAGES.

The following telegram received by Mrs. Fenwick from her French friends gave her very great pleasure:—"Tous nos hommages, Ecole Florence Nightingale, Bordeaux."

During a real peace time tea Mrs. Fenwick received many individual thanks and congratulations, the whole company buzzing with enthusiasm at the happy consummation of the State Registration campaign.

M. B.

#### GUY'S HOSPITAL PAST AND PRESENT NURSES' LEAGUE.

The Twentieth Annual Meeting, and the Twelfth Annual Dinner of the Guy's Hospital Nurses' League, will be held in the Nurses' Home on Friday evening, May 28th, at 7 p.m. Tickets for the dinner may be obtained by members of the League, price 1s. each, and application for them should be made not later than Thursday, May 27th, addressed to the Hon. Secretary, at the Matron's Office.

The Annual Meeting will take place at 8 p.m.

This year competitive exhibitions of photographs and needlework will again be held. Prizes have been placed at the disposal of the judges, and awards will be made in the different classes should entries be sufficient.

#### THE EDINBURGH NURSES' CLUB.

Lady Susan Gilmour presided at the opening of the new Nurses' Club, 8, Drumsheugh Gardens, Edinburgh, on May 5th, and said that the first object was to form the headquarters of the Edinburgh centre of the College of Nursing, Ltd., and also to be a club for all qualified nurses and for those who were preparing for the profession. About £3,500 had been raised, and the club had been furnished almost entirely by the generosity of friends.

The Club was declared open by the Countess of Mar and Kellie, who expressed the hope that nurses, who toiled mentally and physically, would find in it refreshment of soul and body and fresh energy for their work.

At the conclusion of the proceedings Miss Gill, R.R.C., thanked the Committee on behalf of the nurses.

#### AN INEXCUSABLE BLUNDER.

It appears from the report published last week in Messrs. Macmillan's lay-edited *Nursing Times* that it was unrepresented in the Bloomsbury County Court when the case of the Mental Nurses' Association, Ltd., *v.* Nurse Downie was tried, and that it therefore adopted the simple expedient of lifting matter from *THE BRITISH JOURNAL OF NURSING*. If the Judge objects to a judgment being attributed to him which he never gave, and which is our editorial summary of the case, which appeared, quite distinctly under a separate heading, the proprietors of the paper concerned must blame their own journalistic methods for this inexcusable blunder.

## THE NURSES' MISSIONARY LEAGUE.

The Nurses' Missionary League opened its all day gatherings at University Hall on Wednesday with a "Demonstration Study Circle," which illustrated the method of Bible study being used in various Hospital branches. It was a truly "Hospital" circle, all the members being nurses in uniform, two of whom had written brief papers, while all had come with some ideas to contribute to the discussion on the first chapter of St. John's Gospel. The demonstration was listened to with great interest by a room full of nurses.

The day's gatherings were typical of the worldwide influence of the League. Over a dozen missionary members on furlough were present from stations in Africa, China, India, Palestine and the Gilbert Islands. The addresses showed vividly how varied is the work of a nurse in different parts of the mission field. Miss Hope and Miss Haward spoke about China. The former, who has been Matron of a women's hospital in an up-country station, Hinghwa, told of the two Chinese women whom she has now trained to the stage of head-nurse, and of two others who have nearly finished their course; but pointed out that in the men's hospital public opinion will not yet allow of a woman being in charge. Miss Haward, on the other hand, has spent much of her time in training Chinese men nurses in a modern up-to-date hospital in Peking. She described conditions five years ago when a nurse was often found lying asleep on an empty bed, and the day nurses would come on duty with books under their arms and settle down for a nice read before tidying the ward! After regular daily classes in anatomy, physiology &c., six of Miss Haward's pupils last year passed the final examinations of the Nurses' Association of China (almost as high in standard as any Hospital examinations in England).

India was also represented by two nurses of widely different experience. Mrs. Starr spoke about the work on the Afghan frontier, showing the opportunities for breaking down fear and superstition, for building up a new position for women, for instilling new ideas on the value of human life and of cleanliness and hygiene. As illustrating the conditions she told of mothers who, during the first few days of their child's life always carry about a knife to ward off the evil spirits; of girls bought and sold by their husbands; of the charm "guaranteed to cure discharging eyes" worn round the neck of a baby whose eyes were pouring pus. By contrast, she told of the tremendous influence of the medical mission hospitals dotted along the frontier, an influence penetrating where no European may travel. Miss Feare came from a little village hospital in South India. She pictured vividly the poverty, ignorance, and practical serfdom of the thousands of outcasts, told of the mass movement towards Christianity and the tremendous things that Christian influence and education have done. As examples she told of some of these outcasts now trained as nurses, and "managing somehow

to carry on in my absence," and of the young men now able to act as house-surgeons in the hospital. Different as were the circumstances of these speakers, their plea was the same: "*We are handicapped on every side for lack of workers.*"

The urgent need for more workers was emphasised by Dr. E. N. Cook, of Uganda, who mentioned that his Society (the C.M.S.) has five hospitals in India closed for lack of nursing staff, and is appealing for fifty nurses to fill gaps and to open up new work. He described three different types of nursing posts in Uganda. (1) In a well-established centre such as Mengo, with fully-equipped hospital, with branch dispensaries in the neighbouring villages, and with maternity and child-welfare centres. The need for the latter is urgent, as two children in every three die within a week of birth, as compared with one in seven in England. (2) In the country districts away from the capital where the nurse would be in charge of dispensary and itinerating work. (3) In new places where pioneer work is waiting to be done. Dr. Cook spoke of the tremendous interest of the medical work, with its various tropical diseases, and described the fight against sleeping sickness, the clearing of the natives away from the islands infested by the tse-tse fly, the stamping out of the fly's breeding-places (the undergrowth) by herds of antelopes, the cures effected by injections of a preparation of arsenic and the present experiments in allowing the natives to return to their old haunts. It was indeed a romantic story of the medical warfare against disease.

The report of the Nurses' Missionary League, passed at the evening meeting, told of encouraging progress, of nurses volunteering for missionary work, of 45 members who have sailed during the year, of opportunities in the home hospitals. In spite of all this, the leaders are, as Miss Richardson said, "filled with divine discontent," in view of the many vacant posts abroad. She quoted some arresting figures from the report; the total number of British missionary nurses in the whole mission field is 359, whereas the nursing staff of the London Hospital is 486, of St. Bartholomew's 323, of Guy's 300—a total for three hospitals of 1,109.

In a most inspiring and thoughtful closing address, the Rev. E. Shillito spoke of the purpose of God, which can only be fulfilled through the willing service of men and women who will work to win back the world to Him.

## TRAINED WOMEN NURSES' FRIENDLY SOCIETY.

The Annual General Meeting of the above Society will be held at 431, Oxford Street, W. 1, on May 26th, at 5 p.m. It is hoped members will try to attend and take an interest in their own business. The Society has saved upwards of £5,500, a proof of good management by nurses for nurses, which should be an encouragement to them to manage their own financial affairs, and not leave them to be managed by outsiders. All the paid officials are women.

## PROFESSIONAL UNION OF TRAINED NURSES.

■ We are informed that the business of the Professional Union of Trained Nurses has increased to such an extent, that it has been found necessary to divide the Union into sections; the Public Health Section has already been formed, and proposes to meet the last Friday in every month at 5.30 p.m. at 17, Evelyn House, 62, Oxford Street, W.1. It is hoped that all members who are Trained Nurses working in the Public Health Service, will make a note of this, and attend.

At the first Meeting of the Section, held April 30th, at Evelyn House, the chairman and secretary were elected, and the qualifications for all women workers in the Public Health Service were discussed.

The following resolution was unanimously passed, and the Honorary Secretary was requested to forward a copy to the Minister of Health:—

"At a meeting of the Public Health Section of the Professional Union of Trained Nurses, held 30th day of April, 1920, at 17, Evelyn House, it was resolved unanimously that the Minister of Health should be approached and informed:

That the Public Health Section of the Professional Union of Trained Nurses wish to protest most emphatically against Grant Regulations No. 12 Statutory Rules and Orders, 1919, No. 1293.

That in their opinion a training of three years in a General Hospital, should be the basis of the qualifications for all women workers in the Public Health Service, to be appointed in the future."

## EIGHT HOURS' DAY IN DUBLIN.

The Corporation of Dublin, which makes grants to various hospitals in the city, has decided to make such grants conditional upon the establishment of an eight hours' day for nurses. In this connection several medical contemporaries take exception to this decision on the ground that "in the case of a nurse work and duty are not co-extensive, though no doubt she is liable to answer a bell or call at any moment." That may be the case with private nurses, but we have yet to meet the hospital nurse who spends "much of her time on duty sitting down." There is a very wrong conception prevalent of the way in which hospital nurses work. It is usually at full pressure of brain and hand the whole time.

## NATIONAL UNION OF TRAINED NURSES' EMPLOYMENT CENTRE.

Amongst the appointments recently made through the above are two temporary Matrons, three Sisters, and two staff nurses to London Hospitals, Secretary to a Nurses' Co-operation, three nurses to nursing homes and six to private cases. In February, Miss E. B. Hill was appointed Matron of Fielding Palmer Cottage Hospital, Lutterworth. Miss Hill was trained at Charing Cross Hospital, and during the war had charge of a C.C.S. Station, B.E.F.

## HONOURS FOR NURSES.

Among the names of British subjects in the recently-published list of persons awarded the *Medaille de la Reconnaissance Française* by the French Government are the following:—

### GILT.

Mrs. Ella Hay.—Founded in 1914 and subsequently directed the Malo-les-Bains Hospital, which was transferred in 1916 to Neuilly.

Miss Ida Mary Lewis.—Served in various nursing units in Northern and Eastern France.

### SILVER.

Miss Sarah A Bickell.—Matron of Hospital No. 13 bis. in which capacity she displayed untiring devotion.

Lady Hermione Catherine Blackwood.—Certificated nurse. Served in various French and Belgian hospitals from September, 1916, to December, 1918.

Miss Edith Katherine Clifford, certificated nurse.—Rendered splendid services at the front and on the lines of communication from October, 1914, to January, 1919.

Miss Vera Geraldine Luby.—For four years' devoted service in various hospitals in France.

Miss Perry Handley.—For services as operations nurse, in which she displayed great capacity.

Miss Dorothy Edith Hunter.—For invaluable hospital services.

Miss Ada Rosamond Hunter.—Devoted services as motor driver.

## APPOINTMENTS.

### MATRON.

East Suffolk and Ipswich Hospital, Ipswich.—Miss A. R. Burch has been appointed Matron. She was trained at the Burton-on-Trent General Hospital, and has been Sister at the Southern General Hospital, Birmingham, Home Sister at Charing Cross Hospital, and Assistant-Matron at St. Mark's Hospital, City Road, E.C.1.

New End Hospital, Hampstead.—Miss J. N. Jackson, O.B.E., R.R.C., has been appointed Matron. She was trained at St. Bartholomew's Hospital, London, and the Rotunda Hospital, Dublin, and has held the position of Acting Matron at the New Hospital for Women, Euston Road (Elizabeth Garrett Anderson Hospital), Assistant-Matron at Kensington Infirmary, and the Royal Sussex Hospital, Brighton, and Matron of the Royal Surrey County Hospital, Guildford, and of the South African Hospital, Richmond.

### HEALTH VISITOR

County Borough, Derby.—Miss Helen Breatley has been appointed Health Visitor. She was trained at the Royal Victoria and West Hants Hospital, Bournemouth, and has been Ward Sister at Rotherham Hospital, and has been working as a midwife at Ilkeston.

Metropolitan Borough of Lambeth.—Miss Amy Kathleen Roberts has been appointed Health Visitor. She was trained at the Fulham Infirmary, Hammer-smith, W. She also gained experience in private nursing and district nursing, and has been Charge Nurse at Lambeth Schools Infirmary, Maternity Sister at Selly Oak Infirmary, Birmingham, Sister at the Military Hospital, Aylesbury, Sister-in-Charge of a Hostel for Women Workers at Denmark Hill, and Municipal Health Visitor under the West Ham Borough Council.

### TUBERCULOSIS NURSE.

Miss Winifred Dyer has been appointed Tuberculosis Nurse. She was trained at the Holborn Infirmary,

and has had experience of District Nursing at Bermondsey and Torquay, and under the Gloucester County Council.

#### HEALTH VISITOR.

**Battersea Borough Council.**—Miss Patience Campbell has been appointed Health Visitor. She was trained at the Battersea Maternity Home, and has been Senior Nurse in charge of the Bradford Infants' Department, and Superintendent of the Croydon Maternity and Infant Welfare Association.

#### SCHOOL NURSE.

**Bury Education Committee.**—Miss Nora Smethurst has been appointed School Nurse. She was trained at Ancoats Hospital and at St. Mary's Hospital, Manchester, and has worked for two years at the Christie Cancer Hospital, Manchester. She has also done military nursing, and is a certified midwife.

#### LONDON COUNTY COUNCIL.

Miss M. S. Essex has been promoted to be an Assistant Superintendent of School Nurses in the public health department of the London County Council. She was trained at Guy's Hospital, and had experience of private nursing in connection with Guy's Private Nursing Institution. She was also for a year at the Tynemouth Jubilee Infirmary and Matron of the Houghall Hospital, Durham. She had six months' experience of district nursing and since 1906 has been in the service of the London County Council as School Nurse and Nursing Sister.

### QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

Her Majesty Queen Alexandra has been graciously pleased to approve the appointment of the following to be Queen's Nurses, to date April 1st, 1920 :—

#### ENGLAND.

Emma Bickerdike (antedated January 1st, 1920)  
Ethel Clark, Mary Smith, Sarah Burgess, Margaret Gibbon, Flora McN. McLean, Agnes Gill, Edith Schick, Annie Bailie, Edith A. M. Fox, Florence J. I. Knight, Elizabeth Dawson, Charlotte Sprinall, Elsie Carter, Jane E. Booth, Edna Burton, Hilda A. Bradshaw, Joanna F. Goode, Ellen Cotter, May Richards, Edith M. Ashley, Mary C. Costello, Beatrice M. Hignett, Catherine Bruce, Amy H. M. Turner, Ida M. Gourley, Ellen Ruddock, Annie Casey, Nellie E. Chilton, Mary Agnes Fahy, Catherine Hammonds, Elsie L. Harvey, Martha Reynard, Hilda Hill, Agnes McKnight, Pauline Robinson, Christine M. Aston, Josephine Ainsworth, Rachel M. Currie, Evelyn E. Hughesdon, Alice J. Spreadbury, Bessie Evans, Elsie Lumb, Susan G. Baxter, Alice M. Wheeler, Margaret Glover, Ellen W. Willing, Mary E. Foster, Mary B. Owen, Annie Spode, Dorothy M. Kinselle, Annie Johnson, Catherine A. McGregor, Amy P. Williams.

#### WALES.

Mary M. Davies, Eveline Jones, Sarah E. Roberts, Annie Thomas, Edith Owen.

#### SCOTLAND.

Mary Blair, Jessie G. Whyte, Elizabeth Chalmers, Jessie Grant, Annie G. McLellan, Jessie Malcolm, Lily Priestner, Mary Ann Tuffs, Elsie Walker, Annie D. Beaton, Jemima W. Brach, Georgina Mills, Elizabeth Naismith, Clare Powell, Mary F. Russell, Jean R. Sharpe, Reta C. Tudhope, Isabella Turnbull.

#### IRELAND.

Kathleen Canny, Kathleen O'Connor, May O'Neill, Anna B. Walsh, Annie Wallace, Margaret McC. Picken, Ellen F. Mitchell.

## BOOK OF THE WEEK.

### "THE LONELY HOUSE."\*

This enthralling novel should be deservedly popular with our fiction readers. It is a long time since we have read a better story of its kind, or one that better sustained its interest throughout.

Lily Fairfield, a charming English girl of good family, goes for rest and recuperation after the cessation of her war activities, and the death of her aunt who had taken her mother's place, on a visit to a connection at Monaco. "La Solitude" was situated on the mountain at the back of Monte Carlo. It was well named, as its isolation was complete.

Lily's hosts were Count and Countess Polda, the latter of whom she called "Aunt Cosy," although in truth she was not related to her.

The only other inhabitant was old Cristina, who appeared to occupy the post of confidential and general factotum.

On her journey from England Lily had made friends with her two travelling companions—M. Popeau, an elderly Frenchman who invited Lily to address him as "Papa Popeau," and Angus Stuart, a young Scotchman, who from the outset lost his heart to the charming English girl.

From the moment of Lily's arrival at "La Solitude," whither Papa Popeau, in default of the escort which was *not* there to welcome her, volunteered to accompany her, she became aware of something hostile and even sinister in the atmosphere, and it became also plain, that in spite of her generous payment as a paying guest, the hospitality was not likely to be on a liberal scale.

"On the departure of Papa Popeau, the Countess shut the window firmly and drew down the thick yellow blind. Then she turned to her visitor. 'Now,' she said, 'Now, my little one, what is it you would like to do? I am for the moment very busy.'

"What I should like," said Lily, falteringly, "is something to eat, Aunt Cosy."

"I will see if there is any milk," said the Countess reluctantly. "Butter, I know, we have none; there will be some, I hope, to-morrow evening. Your uncle and I, dear child, follow the custom of the country; we have our lunch at eleven."

Poor Lily was not reassured to hear the following conversation in the passage:

"Come, come, Cristina! the young girl is hungry. It will not take you a moment to boil an egg."

"The fire is out."

"That does not matter; you may use my little English stove; it will not take many drops of spirit to boil an egg."

And then Lily heard the Countess add in a low

\* By Mrs. Belloc Lowndes. (London: Hutchinson.)

meaning tone: "Remember, we are receiving with her a hundred and twenty-five francs a week. If she is not satisfied with us, she will go. Also, as the Count said only the other day, she may be useful to us in other ways."

Dinner time that evening, however, revealed another state of affairs. The table was set with exquisite old cut glass, a table cloth and d'oyleys, and in the middle of the table was a gold vase containing a bunch of brilliant coloured blossoms. They made a charming note of colour in the large room, and gave an air of festivity to the well-arranged dining table.

Lily was rather surprised to see that there were no fewer than six cut-glass and coloured decanters filled with various wines and liqueurs standing in a row behind the fruit plates.

That night the expected dinner visitor arrived—a big loose-limbed man, and over his dress clothes he wore a big sporting looking coat. He did all the talking at dinner, and ate but little; and Lily, who had taken a liking to the big, simple hearted man, noticed uncomfortably that the visitor was drinking very freely the three kinds of wine.

Count Poldo did not take any wine himself, but he often got up and helped his guest generously.

That night Lily was wakened by mysterious sounds in the house, and a week later she came upon the dead body of their late guest in a lonely, neglected grove of orange trees. How the body came there remained a mystery, but suicides in the vicinity of Monte Carlo are all too common.

The next disturbing element was the advent of Beppo, the only son of the Count and Countess, who was both handsome and fascinating. His close association with Lily was, of course, very disturbing to Angus Stuart who, with Papa Popeau, was staying in Monte Carlo and, therefore, only caught an occasional glimpse of his beloved. The imminent arrival of Beppo was the occasion of the Countess renewing Lily's wardrobe in a way that if lavish was, even in print, exceedingly attractive.

Evidently the Countess was a woman of taste. Lily was also possessed of considerable wealth, and Beppo was fastidious. *Voilà!*

Count Beppo had all his mother's good points; her tall, upright figure, and her clear cut features, and her one time thick curling hair.

From his plain, short father, he inherited that indefinable look of race. Beppo is a remarkably well drawn character. A spoilt, careless young man of the world, he had still some quite good points, and considering his unscrupulous father and mother, he might have been a great deal worse.

He arrived suddenly upon the scene while Aunt Cosy had gone to meet her adored son by the train arriving at Monte Carlo. Lily felt a little thrilled. She had never met anyone in the least like the young man before. But how about Count Beppo's luggage? He had nothing in his hand but a malacca cane set with one large pale

green turquoise. Held by a young Englishman the cane would have looked foppish and a trifle absurd; but somehow it seemed in perfect harmony with the rest of Count Beppo's smart rather dandified appearance.

His announcement that he must go and greet his papa and mamma surprised Lily, who exclaimed:

"Didn't they meet you? They were expecting you by the two o'clock train."

Her companion laughed. "I gave them what you call in England 'the slip.' I arrived at Monte yesterday. La Solitude is a delightful place, but the last time I stayed here, I said to myself 'never again!' You know what mamma is like," he went on confidentially. "If I had told her I was going to an hotel, there would have been endless discussions and long letters for my dear mamma is a great letter writer."

Lily felt suddenly revolted by Beppo's callous indifference to the disappointment he had inflicted on his devoted father and mother.

The next moment his arms were round the old waiting woman Cristina, and he was kissing her affectionately. He was full of contradictions was this Beppo, and in our opinion if Lily had married him she would have had a more interesting if less secure life than with the rather dull young Scotchman, on whom her choice rested.

The story is engrossing from many points of view. The vivid descriptions of life and scenery in the Riviera, the character drawing which renders everyone real and convincing, and the mystery and tragedy which runs an undercurrent throughout the book.

The disappearance of the disgusting and wealthy old Dutchman brings matters to a climax at La Solitude, and the Count and Countess are denounced as swindlers and murderers. The tragedies in the concluding chapter are perhaps rather too thickly spread, and it was surely unnecessary that gay young Count Beppo should die by a shooting accident. Certainly he had received large sums of money from his "mamma" which could not have been satisfactorily accounted for, but he had no idea of the terrible lengths she went to obtain it for him.

But since there is generally an extenuating circumstance, wicked old "Aunt Cosy" did her crimes for her son.

"Cosy," by the way is a delightful name; perhaps it is enhanced in this case by being so singularly inappropriate.

This is a novel to be read.

H. H.

## OUTSIDE THE GATES.

The death of Margaret the young Crown Princess of Sweden is a great grief to the Royal Families of England and Sweden. She was a very simple and generous great lady in its truest sense.

Evidence of the appreciation of her life and character is forthcoming in the following tele-

gram sent by the ecclesiastical head of the Swedish Church, the Archbishop of Upsala, to the Archbishop of Canterbury:—

Deeply mourning the noblest soul Anglican Christendom has given us since missionaries of old, we praise God for her bright holiness, for her good and happy home, a model of duty and diligence, simplicity and sincere communion, living and active devotion, and for all that the Lord has bestowed upon us through His handmaid. She extended her motherly vocation to far-reaching, indefatigable service. Innumerable blessings from our country, as well as from victims of war and starvation, hallow her rest. This living bond between our branches of Christ's Church is not broken, but transfigured and glorified, heightening our obligation, sanctifying our fellowship.—ARCHBISHOP IN UPSALA.

### MESSRS. D. STEWART & CO. CONTRACTORS TO H.M. GOVERNMENT, ETC.

We have pleasure in drawing the attention of Matrons and Committees of Hospitals, of Asylums, Boards of Guardians, Superintendents of Nursing Homes, and others, to the excellent value offered by the firm of Messrs. D. Stewart & Co. in regard to bedding, blankets, linen, towelling, waterproof sheeting, linoleum, etc., as well as nurses' uniform materials.

The firm, whose address is 16, Staining Lane, Gresham Street, London, E.C.2, hold contracts with many large institutions in London and the provinces.

### A PRAYER AT PLANTING TIME.

BY THEDOSIA GARRISON.

Now I shall make my garden  
As true men build a shrine,  
An humble thing where yet shall spring  
The seeds that are divine,  
With each a prayer I sow them there  
In reverential line.

O, little is my garden space,  
But great the prayer I pray;  
With every seed against earth's need  
That men may sow to-day,  
My hope is thrown, my faith is sown  
To make the harvest gay.

O, gardens spacious, gardens small,  
For you my prayer is said:  
That God's own hand may touch the land  
And give His people bread,  
As once before on that far shore  
His multitudes were fed.

### COMING EVENTS.

May 19th to 24th.—Brussels Health Congress.  
Patron: The King of the Belgians. University of Brussels, Leopold Park, Brussels.

May 20th.—Central Midwives Board. Monthly Meeting, 1, Queen Anne's Gate Buildings, S.W.

May 26th.—The Trained Women Nurses' Friendly Society. Annual General Meeting, 431, Oxford Street, London, W. 5 p.m.

May 28th.—Society for State Registration of Trained Nurses. Annual Meeting, 11, Chandos Street, Cavendish Square, W. 4 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### "LEST WE FORGET."

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—I cannot express how glad I was to be with you on Saturday last. There are not too many of us left, who were inspired by you in 1887, to make State Registration of nurses our aim in life, and who have consistently followed you, our General, to victory, through every imaginable obstacle raised to prevent its accomplishment. How many of us ever thought it would be a fight for 32 years? I think, what we felt on Saturday, next to our thankfulness for the very satisfactory result of your work (you would say 'ours,' but no other one of us had the brain power to start it), was the solemn feeling of responsibility placed in our hands, by the Government, and that at all costs we must remain steadfast and true, working for the uplifting of our profession. It is your knowledge, enthusiasm, and courage that have gained the victory. It is now, for the younger nurses to fall into line and help with the reconstruction. They should make up their minds now, what position they desire for their profession 20 years hence, and accomplish it. Just get on with it. They need not wait to be told what to do. Acquire knowledge, and impart it to others, "Lest we forget." If our pioneers realised that better teaching and organisation were required 32 years ago, how much more do we not all see the absolute necessity for them to-day? Thank you for saving the position for us.

Yours gratefully,

JULIA HURLSTON,

Member of the League of St. Bartholomew's Hospital Nurses.

Coombe Head, Haslemere.

### SOCIETY FOR THE PREVENTION OF VENEREAL DISEASE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—With reference to the recent correspondence that has taken place in your columns in regard to the prevention of venereal disease, I think perhaps your readers may be interested to know that the policy of my Society has been adopted by the Portsmouth Borough Council. This policy is that of the education of the public in the essential fact that venereal disease can be prevented by immediate self-disinfection.

The Portsmouth Borough Council have decided that steps shall be taken to educate the male inhabitants of the Borough in these facts. The Borough Council adopted this policy on the



recommendation of their Medical Officer of Health who, in his special report on the Prevention of Venereal Diseases, produces a restrained and logical argument in favour of such a policy that is most convincing.

The resolution of the Portsmouth Health and Housing Committee submitted to the Portsmouth Borough Council, which has been confirmed by them, was as follows:—

"That this Committee, having carefully considered the Medical Officer of Health's Special Report on the Prevention of Venereal Diseases approves and adopts it, and in view of the established fact that these diseases cause suffering and death to many innocent women and children, and further, realising the duty of the Health Authority to protect the health of the inhabitants urges the Council to empower the Committee at once to take the necessary steps to disseminate a knowledge of the methods of prevention indicated in the Report among the male population of the Borough, and to impress upon men their duty to the community in this matter."

Yours, &c.,

H. WANSEY BAYLY,

*Hon. Sec., S.P.V.D.*

143, Harley Street, W.

### SHOULD WE BE TAXED TO BRING GERMAN CHILDREN TO ENGLAND?

*To the Editor of THE BRITISH JOURNAL OF NURSING.*

DEAR MADAM,—With reference to your correspondent's enquiry about the Government grant to relief funds for the children of Europe, the following statement was made in the House of Commons by the financial secretary on April 26th: "It is not possible to give a separate figure for the relief of children as apart from general relief, for which £12,500,000 was granted in 1919-20, and a further £10,000,000 (for Austria and Poland) is included in the Estimates for 1920-21. Grants to voluntary societies under the pound for pound scheme amount to £424,723. These societies deal primarily with the relief of children."

The enclosed list of allocations will show that famine stricken and underfed children in all countries benefit under this scheme. The permanent value of the work lies in its importance as a Child-Saving movement, which will undoubtedly result in Child Welfare Centres being established in all those areas touched by starvation, tuberculosis and "osteomalacia," from which over 1,000,000 children have already died.

Yours faithfully,

B. GILBERTSON.

7, Hogarth Hill, N.W.4.

[B. Gilbertson does not reply directly to the question of our correspondent "Mother of the Dead." She asked "if mothers bereaved in the horrible war by German and Austrian barbarity were being taxed to entertain hundreds of enemy alien children coming to England?" We gather

from the reply that bereaved English mothers with other citizens are being taxed for this purpose under the "pound for pound scheme," so far to the extent of £424,723; but we are not informed how much is being expended in the most undesirable scheme of entertaining these alien enemies in England—than which nothing can be more obnoxious to the feelings of those whose nearest and dearest have fallen in the war, or who have died of suffering and ill treatment from brutal German and Austrian barbarians. Neither does B. Gilbertson state how much is being paid for the huge campaign of advertising in the daily Press—whole and half-pages of displayed pictorial "ads" appearing constantly in quite a number of daily and weekly papers. We always doubt this enormous expenditure of presumably charitable appeal funds in advertising; it is not possible for the publications which admit them to maintain an impartial attitude.

We don't want German and Austrian children up to the age of 15 brought to this country. It certainly is a gross outrage upon the feelings of "mothers of the Dead."—ED.]

### KERNELS FROM CORRESPONDENCE.

*Sister Martha.*—"May I suggest that all those who have been faithful registrationists as members of the Society for State Registration of Nurses and have helped to win the Nursing Acts should be entitled to wear a badge—just a bar or something like that, with the words 'State Registration' and date, inscribed in gilt letters on an enamel ground. After all we deserve some mark, considering all the opposition we have overcome."

[What do the members of the Society think of this suggestion?—ED.]

*Trained Nurse, Cornwall.*—"I note Sir Arthur May said at the recent meeting of the Cornwall County Nursing Association that the spirit of service had vanished. If it has the County Nursing Associations have done much in the past to kill it, by under-training, underselling efficiency, and sweating. It would be well if these society associations themselves vanished, and the trained women were encouraged by fair terms of service by the Ministry of Health. We district nurses ought to be free from social patronage in these days; it is quite out of date."

### OUR PRIZE COMPETITIONS.

#### QUESTIONS.

*May 15th.*—What are the symptoms of the presence of adenoids and diseased tonsils in a child? What ill results may follow their neglect?

*May 29th.*—Flatulence after operation; give causes and treatment.

*June 5th.*—What is blood? What is its composition? What causes it to clot?

# The Midwife.

## NATIONAL TRAINING SCHOOL FOR DISTRICT MIDWIVES.

The Annual Meeting of subscribers and friends of the British Hospital for Mothers and Babies, and the Council for the Promotion of the Higher Training of Midwives, Wood Street, Woolwich, was held in the Great Hall, St. Bartholomew's Hospital, Smithfield, on Wednesday, May 8th.

It was a great disappointment that Princess Christian who is President both of the British Hospital and of the Council, was unable to fulfil her intention of presiding. Her Royal Highness sent a message to the meeting expressing her regret that she was unable to be present and her interest in the objects which the meeting was convened to promote. In her absence the chair was taken by the Countess of Stamford, Vice-President of the Council for the Promotion of the Higher Training of Midwives.

The first speaker was Lieut.-Colonel Sir Richard Temple Bart., C.B., C.I.E., who explained that the object of the meeting was to inaugurate a "Million Shilling Fund" to complete the £100,000 required to build the National Training School for Midwives. He explained the dual object of the appeal and said that those present were assembled to do their best for the combined institutions. Both would look after the welfare of mothers and babies and strive for an increase of the manhood of the nation.

The work of the training school was most important. Woolwich had been selected because of the advantageous character of the neighbourhood for providing clinical material. There is the Dockyard, the Arsenal, the large respectable working class population—naval, military and civilian—to provide suitable patients.

Long before the war the hospital had been felt to be of national value and that the scope of its work must be secured. It was proposed to provide a course for pupil midwives which would secure their competence when trained. Candidates without previous training who would eventually take teaching posts would be required to take a two years' course, those contemplating working as district midwives a one year's course. With a hospital of 42 beds they hoped to turn out 30 well-trained midwives each year.

The life of mothers was a constant state of war, with the constant fear of becoming casualties. It was up to men as a tribute to the courage of women to see that proper provision was made for them in childbirth.

The birthrate in England and Wales in 1918 was 662,000, or about 13,000 a week. Every one of these 662,000 women who took the field was in the trenches for a month, *i.e.*, 55,000 at a time. Every month 257 died, and 2,200 were disabled, some temporarily, some permanently. Inadequate midwifery was one of the causes of these casualties.

But what happened to the mothers was a trifle as to what happened to the babies. Of the 662,000 babies 90,000 died that year, or 260 a day. Those were not the statistics of trench fighting, but of a severe battle. It was only because the mothers went down into the trenches singly that these conditions were not realised. Every mother at every birth went "over the top," and as in actual warfare only adequate preparation would diminish the risk. This was the clear end in view of the institutions for the support of which he pleaded. Before the war their finances were sufficient to enable them to go ahead, but the building which would then have cost £40,000 would to-day cost £100,000. That was why the object of the meeting was to inaugurate a million shilling fund. The object was to save the mothers, to save the babies, and to train women competent to save both.

Other speakers were Sir Dyce Duckworth, who wished the movement great success, and Miss Alice Gregory, the Hon. Secretary, who pleaded eloquently for better opportunities of training for midwives, and emphasised the inadequacy of three or even six months' training. She spoke with gratitude of the fact that H.R.H. Princess Christian had been one of the first to believe in the scheme for the higher education of midwives and to give it her support.

## THE PORTSMOUTH MUNICIPAL MATERNITY HOSPITAL.

The Mayor of Portsmouth (Councillor John Timpson, J.P.,) recently opened Ravenscourt, Elm Grove, as a Municipal Maternity Hospital.

The staff, says a contemporary, consists of a matron, two sisters, and five probationers. In a large hut, erected in the garden, are the sleeping cubicles for the probationers, who will take their meals in the main building. It is intended only to accept as patients those women who are unable to find adequate accommodation in their own homes. A fixed fee of 30s. for a fortnight is to be charged, but the Sub-Committee of the Health Committee, which has charge of the hospital, wish it to be clearly understood that there is no intention of competing with any of the existing nursing homes, as the institution is only intended to supply a want for the poor people that has long been felt. Arrangements have been made whereby cases requiring operations may be transferred to the Royal Portsmouth Hospital at a fixed fee. Infectious cases will be transferred to the Infectious Diseases Hospital at Milton.

The authorities of the Women's Hospital, Castle Gate, Nottingham, have decided to build a new and up-to-date hospital on a desirable site acquired in Peel Street. In this connection the Duchess of Newcastle is appealing for liberal support.

# THE BRITISH JOURNAL OF NURSING

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Vol. LXIV

## EDITORIAL.

### ST. JOAN OF ARC.

#### THE DAUNTLESS MAID OF FRANCE.

"She climbed the steep ascent of Heaven  
Through peril, toil and pain;  
O God to us may grace be given  
To follow in her train."

The figure of Joan of Arc, the dauntless Maid of France, is one which shines out in the pages of history as that of one of the greatest heroines the world has ever known. Inspired by a lofty patriotism and serene faith, she achieved military success where distinguished soldiers failed, and died a martyr at the age of twenty, a loyal subject of the King who owed his coronation to her, but who left her to her cruel fate, and a faithful daughter of the Church which burned her at the stake as a heretic.

To-day, five centuries later, that Church has formally admitted her to its calendar of saints, and thus officially recognised that she won by exceptional holiness a high place in heaven and veneration on earth.

The story of Joan, the Maid, is one which English and French alike may well wish had never sullied the pages of their history. Born in 1412 the peasant girl grew up in a distracted France. Domremy, her birth-place, on the banks of the Meuse, was Armagnac, and French in sympathy, but the village across the river was Burgundian, and favoured the claims of the English King, thus Joan early became acquainted with the horrors of war. She was only thirteen years of age when the idea consciously took root with her that her mission was to save France. Then followed four years of waiting, of listening to the voices which bade her go to the aid of her beloved country and its uncrowned King. Still the English invasion continued until Orleans, the key to a strong

position was attacked, and its fall seemed imminent.

Then Joan began her active mission. She obtained an audience of the Dauphin, and eventually so impressed that vacillating Prince that she was placed at the head of some thousands of armed men, whose purpose was to raise the siege of Orleans. But before proceeding on her desperate mission she had to appear before a commission of Bishops, and satisfy them that she was not a witch. Then she triumphantly raised the siege of Orleans, and, according to her promise, secured the coronation of the Dauphin in the cathedral at Reims.

Alas! the Maid's further successes were rewarded with jealous ingratitude by the monarch she had championed, and with treachery on the part of her own countrymen. At the height of her success she was unhorsed and captured by a Burgundian, and sold to the Duke of Bedford, the English Regent in France, for a large sum of money.

Never did her faith burn more brightly than during the year when she was in prison, and at her trial for sorcery, which failed, followed by a charge of heresy, on which she was unjustly condemned. She was burnt at the stake in the market place at Rouen, English and French participating, to their eternal dishonour, in that shameful scene.

Brave, loyal Joan, fair Maid of France, steadfast in death as in life! The voice of the King you served so faithfully was silent in that last dread hour, and you faced its agony alone; but the gates of pearl swung wide as your pure soul passed to the Judgment Throne; and, as you took the place allotted to you by the Majesty on High, the King of Kings Himself reversed the earthly verdict which condemned you heretic, with the words, "Come ye blessed of my Father, inherit the Kingdom prepared for you from the foundation of the world."

## OUR PRIZE COMPETITION.

**WHAT ARE THE SYMPTOMS OF THE PRESENCE OF ADENOIDS AND DISEASED TONSILS IN A CHILD? WHAT ILL RESULTS MAY FOLLOW THEIR NEGLECT?**

We have pleasure in awarding the prize this week to Miss M. Ruth White, Royal Hospital for Sick Children, St. Michael's Hill, Bristol.

### PRIZE PAPER.

#### SYMPTOMS OF ADENOIDS AND DISEASED TONSILS.

1. In infancy adenoids vegetations are soft, vascular and spongy, but in older children they become hard, tense and fibrous. They are almost invariably associated with hypertrophy of the faucial tonsils, and may cause decided mechanical obstruction, sufficient in time to produce changes in the facial bones, amounting to positive deformity. The bony palate may be acutely arched, and the teeth protruding. Rachitic children are more affected than others, and adenoids are often a channel of infection for tuberculosis. The first symptoms often follow an attack of measles, scarlet fever, or diphtheria. The general symptoms are well marked, and include chronic rhino-pharyngeal catarrh, mechanical obstruction, otitis media, general malnutrition and anaemia, and reflex nervous phenomena. The first shows itself by chronic nasal discharge or frequently recurring acute attacks. The mechanical obstruction is the explanation of the night terrors to which these children are subjected, and the attacks of dyspnoea at night may eventually result in asphyxia. In rachitic cases there are often deformities of the chest, which is narrow and poorly developed. The root of the nose is flattened, and the transverse vein appears slightly enlarged and prominent. The nostrils are very small and compressed, and the child a habitual mouth breather. There may be some impairment of hearing, amounting almost to deafness, due to tubal catarrh or suppurative otitis. Headaches are common, and there is often incontinence of urine, which is most marked at night. The child has a singularly vacant look, which is accentuated as the mouth is always open. These children, owing to their backwardness, are often thought to be mentally deficient, whereas they are really quite intelligent, and show remarkable improvement after operation. The general health of the patient is affected, as owing to the difficult respirations the blood fails to contain sufficient oxygen, and is therefore deficient in quantity and quality, causing an anæmic condition with resulting langour, fretfulness, and a general feeling of illness with anorexia. Sometimes there is enlargement of the cervical and axillary glands. This is due especially to

diseased tonsils. The depressions in them (tonsillar crypts) take up with great facility every kind of poison coming in contact with them, acting as defending agents. For this reason many physicians are against their removal, unless *absolutely* necessary, although the majority of surgeons advocate it. If, then, their epithelium is diseased or destroyed, such poisons as are taken up are conveyed to the lymphatics, and through them reach the general circulation. Epistaxis is not infrequent, and such nervous affections as stammering and twitching of the face are often put down to the presence of enlarged tonsils and adenoids.

### THE RESULTS OF NEGLECT.

2. It is very important that a child suffering from adenoids and hypertrophied tonsils should be submitted to a surgeon for thorough examination, and that, if it is considered necessary, they should be removed at the earliest possible opportunity. A child in this state stands a poor chance against an attack of diphtheria or scarlet fever, and these diseases are prone to attack them with greater severity than normal children. They are stunted in growth, liable to frequent attacks of bronchitis, and are predisposed to phthisis. The follicles of the tonsils, or tonsillar crypts, are liable to become filled with pus, as a result of exposure to septic infection, when the tonsils are abnormally large, and the patient becomes very ill and quite unable to swallow. This condition is known as Follicular tonsillitis, and as soon as the pain and inflammation has subsided the tonsils must be removed.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Alice M. Burns, Miss A. M. Douglas, Miss P. Thompson, Miss G. James.

Miss A. M. Douglas points out that "a person suffering from adenoids is obliged to breathe through the mouth, and this means that the air, instead of being filtered through the nose, which is specially designed for that purpose, passes over the tonsils through the trachea into the lungs.

"The result is that the tonsils become inflamed, enlarged, and may ulcerate. Tonsillitis may be chronic or acute. The latter having three forms:—(1) Follicular tonsillitis (when the follicles or secretion glands are affected); (2) parenchymatous tonsillitis (when the tonsil is involved); (3) suppurative tonsillitis or quinsy (in which an abscess forms)."

### QUESTION FOR NEXT WEEK.

What are the usual causes of gall-stones? Describe the preparation of a case for operation, and the subsequent nursing.

## THE LATER EXPERIMENTAL WORK ON VITAMINES.

A LECTURE DELIVERED AT THE VIROL RESEARCH LABORATORIES TO NURSES AND HEALTH VISITORS ON APRIL 23, 1920.

By A. KNYVETT GORDON, M.B. (Cantab.)

In addressing you to-day on the subject of the bearing of some of the recent work on accessory food factors, or Vitamines, as they are popularly called, I do not propose to discuss the details of the experimental evidence, but rather to indicate broadly their practical bearing on the problems with which you, in your daily—and may I say, most useful—work, are frequently confronted.

Let me first review the history of the subject during the last few years. Only a very short time ago dietetics was not recognised as a science at all by the average person. In fact, it consisted in a collection of opinions—which could hardly even be called pious—based on very little but personal fads, and characterised by a tendency to differ widely on every important point.

It was pretty much the same, or perhaps worse—because the victims could not complain—in the practice of infant feeding, where a long list of modified milks and patent foods bewildered the unfortunate nurse and vied with the pin under the binder in the production of abdominal emergencies. Much work, even at this time, had been done in the physiological laboratory, on the comparative value of food stuffs, but it had not penetrated either to the consulting room or the nursery to any valuable extent.

Then came the war with its shortage of some articles and expensiveness of many more, and we began to think of food not in kind but in calories, and we bought it for its value to the body in the production of heat and energy rather than for its palatability. Beef gave place to beans—with or without the exiguous portion of transatlantic pork.

But the pendulum, as usual, swung too far, and there was a tendency to think that so long as the body got its proper quantity of fuel—for that is what the caloric point of view came to—it did not matter very much what we started the fires with.

Then the public discovered the physiologist, in much the same sort of way, by the bye, as a certain daily paper published a sensational account of the recovery of a patient after tracheotomy for diphtheria some fifteen years after every resident in a fever hospital had

been doing it successfully in his daily round. Vitamines, therefore, became popular.

Now let me sum up the position. If a young animal is fed on a diet consisting of chemically pure protein and carbohydrate together with either cooked fat such as lard, or purified vegetable oil, in quantities more than sufficient for its daily output of heat, energy and tissue waste, it is found that it soon *ceases to grow* and its *resistance to bacterial infection is lowered*. Furthermore, it may develop rickets, scurvy, or a variety of peripheral neuritis akin to the disease known as beri-beri. If now this diet is supplemented by a very small quantity of fresh milk, growth is renewed and these diseases disappear. That is the broad outline of the basal facts. I show you slides of two curves illustrating the growth of young rats on the pure diet with and without the fresh milk supplement.

Further research showed that there were three essential principles in the fresh food, to which the name of vitamine was given; namely, "Fat soluble A," which is responsible for growth, resistance to infections, and for the prevention of rickets; "Water soluble B," for prevention of neuritis, and probably also partially concerned with healthy growth; and "Water soluble C," for the prevention of scurvy.

The distribution of each of these principles has been worked out and is given in a very valuable table in the pamphlet on the subject recently published by the Ministry of Health, which I advise you all to read. I need not now give the details, but I may remind you that Fat soluble A is present in fresh animal fats, but absent from those of vegetable origin; it will stand a temperature of boiling point for a short time in a closed vessel (*i.e.*, without much exposure to air), but is destroyed by prolonged heating. Fresh milk and lightly boiled eggs therefore contain it. The animal derives it originally from fresh green vegetables and stores it up in its tissues, but to obtain a sufficient quantity of it direct from the vegetable kingdom we should have to eat larger quantities of cabbages, etc., than our intestine could possibly accommodate.

The Water soluble B factor is found mainly in the germ or outer part of grains—which incidentally is removed in the preparation of white flour—and in meat. It is remarkably resistant to heat and will stand all ordinary cooking.

The Water soluble C is present in fresh vegetables, and notably in fresh fruits and their juices—lemon juice being about the best—but it is destroyed by even a slight amount of heat

and is therefore absent from all cooked foods and from lime juices, lemon syrups, etc., that are boiled in the course of manufacture, as most of them are.

Coming now to the practical application of these facts to the feeding of human beings, we may clear the ground somewhat by pointing out that the problem really resolves itself into the supply of fat soluble A for infants and growing children. Both the water soluble B and the antiscorbutic C are sufficiently widely distributed in foods to give us no anxiety in ordinary diet, and adults do not require vitamins to such an extent, as the necessity for providing growth does not develop after childhood. Moreover, the diet of grown-up people is much more varied. So we will pass to the question of fat soluble A in children, with the note that if infants are to be fed on dried or otherwise prepared milk, the antiscorbutic vitamin must be supplied—as it usually is—by some fresh fruit juice.

Let us then consider fat soluble A for children, more closely. Do they always get it? If they can command a sufficient quantity of fresh milk or of butter they do not suffer, but is this always possible? For artificially fed infants, milk is sometimes boiled, which may easily destroy the factor altogether. In dried milks, while it is *possible* to preserve the fat soluble A, there is considerable doubt whether this is always done. It depends on the degree and duration of the heat to which it is subjected, and so far as my information goes both these factors vary considerably. From what I learn from physicians and others who have a large experience of infant feeding, it seems to be agreed that a baby does not thrive on dried milk alone. When we pass the age of infancy, and poverty exists, milk and butter become prohibitive. How many poor children get even half a pint of fresh milk a day, or any butter or eggs at all? They eat margarine instead.

Until recently the manufacturers were compelled to add a proportion of animal fat to their margarine, but—unhappily—that proviso has been withdrawn. Inasmuch as animal fat is much more costly than vegetable oils, I leave it to your imagination whether a commercial undertaking will continue to use it!

But there is another factor. Formerly it was impossible to use low grade vegetable oil, because the resulting margarine was not sufficiently firm, and the taste and smell of the oil survived. Nowadays, however, it is possible to make margarine out of almost any oil by subjecting it to a high temperature and forcing hydrogen through it under pressure, which not

only removes all taste and smell, but makes the finished product firm and white. Consequently, people who formerly disliked margarine now consume it with avidity. From the point of view of the production of heat and energy this is satisfactory, but it can contain no fat soluble A whatever, and in practice does not. So if a child gets little butter and milk or none at all, we must add fresh animal fat in some form or other to its diet. Lightly boiled eggs are useful, but how many poor children get eggs?

Now let us consider the result of this deficiency of fat soluble A; firstly, the children cannot grow properly: that means a stunted race. Then we have the question of rickets. In a recent inspection of London County Council school children it was found that no less than 80 per cent. showed signs of that disease, and I show you photographic slides of a puppy fed on a diet containing vegetable oil as its source of fat, and showing marked bending of the bones, which is visible not only in the direct view of the whole animal, but also in the X-ray photographs of its legs. When cod liver oil was substituted for the vegetable oil the rickets was cured. This must not be taken, incidentally, to mean that cod liver oil is necessarily suitable for children. Many cannot digest it at all, and it is therefore useless and cruel to give it. Secondly their resistance to infectious disease is concerned, and this hits not only the individual, but is responsible for much of the extent and severity of microbic diseases—not only the infective fevers be it noted, but tuberculosis also. Examples are within the experience of all of you. The recent epidemic of influenza took a heavy toll in death and invalidism, and the children's hospitals get more tuberculosis than ever they did, especially, as I am told, tubercular peritonitis.

How does the fat soluble A increase the resistance to infection? Personally, I think, by raising the nutrition and numbers of the white blood corpuscles. I do not wish to lay undue stress on this point, because the experimental work is not yet completed, but I may, perhaps, show you two photographs from preparations of my own. The first is one microscopic field of the blood of a rather weakly rat, not on a deficiency diet, but just a puny animal. You will notice that it contains only one white blood cell. To the diet a proportion of Virol—which was taken as the most convenient and most easily digestible source of fat soluble A, was added. The physique of the rat improved markedly and three weeks later its blood was again photographed, and you will see that the same type of field now contains six healthy



white cells. I need hardly say that care was taken to secure a correct average by counting a very large number of cells in each case.

So far, you may perhaps have the opinion that so long as fat soluble A is present, it does not matter of what the rest of the diet is composed, but this is not so. You must also have a proper balance of all its constituents. This is well seen in the case of rickets, where it was found that if a puppy ate an excess of starchy food it became rickety, even though it was receiving fat soluble A. The moral of this I need hardly point out to anyone engaged, as you are, in the practical feeding of infants and children. Do we not all know the fat baby, the pride of its parents—and perhaps taking a prize in a baby show—fed on some of those abominable starchy foods? Its arms, legs and teeth show a degree of rickets that would make it an excellent illustration of that complaint in a text book of children's diseases. Of older children, many, as you know, get too much starch, because it is the cheapest form of energy. As regards infectious disease, too, it is common knowledge in fever hospitals that those fat, starchy children stand scarlet fever and diphtheria much worse than the normal or thin subject. No, we must have balance as well. Man is a mixed feeder, and the arrangement of his alimentary canal is an object lesson against the "arian" of any type. Nor must we forget that a food must be both digestible and palatable. Many animal fats are not. Children, as you are aware, usually leave the fat from their meat on their plates, in which their instinct is correct. Nor is the bacon fat of the present time much better. It is very doubtful whether it contains any fat soluble A, and it is so nauseous that I really wish it were relegated to its transatlantic home. It were better left for those adults whose stomachs are more capable of the herculean task of digesting it.

To sum up, in your work amongst children and infants make sure firstly that their diet does contain the essential vitamins, but do not let their value be diminished by any improper balance of the other essential factors, or hindered by indigestibility.

### THE GENERAL NURSING COUNCIL.

The Nursing World is naturally keenly interested in the work of the General Nursing Council; it is right it should be so, but the nurses will realise that during the preliminary stages of drafting the Rules, the General Nur-

sing Council must have time for free discussion with as little publicity as possible. The Rules, which are to interpret the Act, must, when agreed, be approved by the Minister of Health, and laid before each House of Parliament forthwith for twenty-one days. They will then be in print for every nurse who wishes to do so, to consider.

#### THE REGISTRAR.

An advertisement for a Registrar to the Council appears in our advertisement columns, by which the profession will see applicants must be trained nurses holding a certificate of not less than three years' training, with administrative experience. The salary is fixed at £550 per annum, inclusive.

### GENERAL NURSING COUNCIL FOR SCOTLAND.

The first meeting of the General Nursing Council for Scotland was held at the office of the Scottish Board of Health, Edinburgh. The meeting was opened by Sir Leslie Mackenzie, of the Board of Health. Captain C. B. Balfour, of Newton Don, and Miss Norah Milne, B.Sc., were appointed chairman and vice-chairman of the Council respectively. Mr. C. L. Farmer, of the Scottish Board of Health, was appointed interim secretary.

### POOR-LAW INFIRMARY MATRONS' ASSOCIATION.

The Quarterly Meeting of the Poor-Law Infirmary Matrons' Association was held by kind invitation of Miss Cockrell at the St. Marylebone Infirmary. Miss Barton presided. After the short business meeting, Dr. Saleeby gave an interesting address on "National Health and the Smoke Nuisance." This was followed by a very attractive tea, after which the members held an interesting and informal discussion.

#### PRESENTATION.

Miss Beatrice Cutler, the Assistant Matron, was the recipient of some charming gifts before leaving St. Bartholomew's Hospital.

*From the Nursing Staff*: A gold wristlet expanding bracelet watch with the Bart.'s shield, and her name and the date, May, 1920, inscribed on the back of the watch.

*From the Domestic Staff*: A pair of silver specimen vases.

*From the Linen Room Maids*: A black rose bowl with floating roses.

A very pleasant "Coffee Social" party was also given by the Sisters in the Superintendent's Room on May 11th, when Miss Cutler was the guest of honour.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION

## RESOLUTION OF SYMPATHY

WITH HER ROYAL HIGHNESS THE  
PRESIDENT, AND MEMBERS OF THE  
ROYAL FAMILY, ON THE DEATH OF  
THE CROWN PRINCESS OF SWEDEN.

At a meeting of the Executive Committee a Resolution was passed conveying on behalf of all Members of the Corporation, an expression of sympathy with Her Royal Highness the President and with Their Royal Highnesses the Duke of Connaught and the Prince and Princess Arthur of Connaught on the death of the Crown Princess of Sweden. The Hon. Secretaries have given effect to the Resolution as instructed by the Committee:

## PRESENTATION.

After the Lecture on Saturday, 29th inst., at 10, Orchard Street, a Presentation will be made to Miss Margaret Breay, from the Nurses' Societies, represented on the Central Committee, and from a few of her friends in the State Registration movement who have expressed a wish to contribute individually.

As there is little time at our disposal to send out any individual invitations for the 29th, we are availing ourselves of the hospitality of the columns of the R.B.N.A. Supplement to invite any friends who can be present.

Nurses owe an immense debt of gratitude to Miss Breay for her single-hearted and most unostentatious work in the cause of State Registration. She has rendered valuable help as a delegate of the Society for State Registration of Nurses on the Central Committee; but, in addition to this, from the time when that Committee was constituted, she has done all the work of transcribing and reporting at its meetings and thereby has saved the nurses an immense expenditure of money in connection with their hard-won victory. They feel that they do not wish that victory to pass without giving Miss Breay some token of the goodwill of her colleagues grouped in the constituent societies of the Central Committee.

Miss Breay has held the position of Hon. Assistant Editor of THE BRITISH JOURNAL OF

NURSING for twenty-four years, and has worked to keep a voice in the Press for her fellow-nurses with the most absolute devotion.

## "THE ONLY TUNE HE KNEW."

Our telephone awoke one morning and we listened with amused, though sympathetic, attention to one of our Members (a private nurse and an enthusiastic Registrationist) as the wires of the telephone vibrated indignation. It appeared that she had congratulated one of her fellow nurses on the passage of the Registration Bill and the subsequent appointment of the General Nursing Council of the Profession, and had received the reply, "Well, what is it going to do for me?" The old cry indicative of an outlook that has hindered and handicapped the nurses for years! Each time the curtain rises on some new phase of nursing organisation the same old refrain! Although acceding now to our fellow member's request to find—or rather we should like to say to seek—inspiration for an article in the words above quoted, we pointed out to her that so far as the B.J.N. readers are concerned, those who say "How much can *we* do *with* the Act to help ourselves?" are in the majority. Nevertheless, we promised that the article she suggested should appear, for we agree that the habit of turning everything inwards is, on all possible occasions, to be deprecated.

If a typewriter or a sewing machine had been presented to the offender, in the incident narrated, she would not have pushed it aside with her usual remark. She would have recognised much which she could do with it, and would immediately have set to work to learn how to. The Registration Act offers far greater possibilities to the nurse than any machine ever invented, and it will well repay each one of us to understand the powers it gives, and to use it to the fullest extent, in order to attract to the profession women of culture and high aspirations.

Every Member of the First General Nursing Council has taken his or her seat with the single intention of laying well and truly the foundations of nursing education and nursing organisation, but, if all the hopes of the promoters of the Regis-

tration movement are to be realised, the Council, and particularly the nurses' representatives on that Council, have a right to expect from the Members of the Profession a loyal and alert co-operation with them in their efforts to help the nurses and to raise the standards of nursing education. The nurses themselves must take their places as builders of their profession; they must grasp the possibilities which have been placed in their hands. Therefore we beg of them all not to adopt the "Wait-and-see-what-it-will-do-for-me" attitude, but to take instead the rôle which should be that of professional women, and to realise that they must be alert, independent egos with minds and opinions and aspirations of their own, taking an active and intelligent interest in the affairs of their profession, and not poor things belonging to a kind of group soul guided only by such talk as may chance to fall upon their ears.

During the next few weeks nursing is to take its first tottering steps as a profession in its childhood. Let every Member of it do, each in her place, all that she can in order that it may reach a position of honour among the great professions; let each think first of the universal good and thus acquire those long-range emotions that make up the secret of power in the individual.

### A SPECIAL APPEAL FOR QUEEN CHARLOTTE'S HOSPITAL.

Princess Arthur of Connaught will be present at a meeting at the Marylebone Town Hall on Tuesday, June 8th, at 3 o'clock, which has been called to inaugurate a special appeal fund in aid of Queen Charlotte's Lying-in Hospital.

### CORRESPONDENCE.

#### WE THANK YOU.

*To the Members of the R.B.N.A.*

MESDAMES,

May I thank all those of my fellow-members of the Association who have sent me such kind expressions of goodwill upon my appointment to the General Nursing Council. These expressions of goodwill have given me unmixed pleasure, as also have the words of appreciation of my work in connection with the State Registration movement. I cannot, however, accept all the remarks which have been made in this connection without saying how much I owe to your Assistant Secretary, Miss Glover. She has worked so loyally and splendidly for the nurses, and, but for this, I should certainly not have been free to undertake one quarter of the political work which I did. Again and again you have drawn my attention to her unflinching courtesy to you, and I feel that I should not accept your congratulations without acknowledging how much I owe to "my good comrade."

I am,

Yours very truly,

ISABEL MACDONALD.

*To the Secretary R.B.N.A.*

MADAM,

I wish through the medium of the Official Organ of our Association, to thank my old friends in it and also the new members who have written to me offering their congratulations on my appointment to a seat on the General Nursing Council. Their kindness in doing so has gratified me very much.

I also take opportunity to remind the private nurses that I have the honour to represent their section of the profession on the General Nursing Council, and that, therefore, I shall always have a special regard for their point of view. I shall be glad to hear from any of them who can think of any matter in which I can be of help to them on the Council.

In closing I should like to say that, in my work on the Council for my fellow nurses, I shall always try to live up to the beautiful motto that the Princess gave to her Royal Association of Nurses' and will be "Steadfast and True" always in supporting the principles that are likely to be helpful to them. I am, &c.,

ALICE CATTELL.

Member of the General Council and the Executive Committee of the Royal British Nurses' Association.

### NOTICES OF MEETINGS.

#### CIVIC DUTIES AND RESPONSIBILITIES.

On Saturday, May 29th, at 3 p.m., at 10, Orchard Street, Councillor Beatrice Kent will lecture on "Civic Duties and Responsibilities." The lecture is to be held under the auspices of the Association of Trained Nurses in Public Health Work, and Members of the R.B.N.A. and of its Affiliated Societies are invited to attend and also any nurses, not members of the Association, who may be specially interested in Public Health Work.

#### THE PROCEDURE OF CONDUCTING MEETINGS.

On Saturday, June 5th, at 3 p.m., Mrs. Bedford Fenwick will give a "grind" on "The Procedure of Conducting Meetings."

We would strongly urge all nurses who can to attend. It is highly important that they should have a more intimate knowledge of the rules and conduct of business meetings. Very rarely does opportunity offer for gaining knowledge of this kind, and frequently much time is lost at the nurses' meetings from their lack of it. Several may argue that public work of any sort does not appeal to them, but we consider that they should really qualify themselves to be able to take their seats on the Council or on one or other of the Committees of their Association, when, or if, their fellow-members honour them by election. Further the "grind" on June 5th should prove a very healthy antidote to the seclusion of the sickroom and the tendency to think of nothing but the unceasing round of ordinary nursing work.

ISABEL MACDONALD,  
Secretary to the Corporation.

## NURSING ECHOES.

Those who were privileged to witness the procession on Sunday in honour of the canonisation of the "Blessed Maid" will not easily forget it. The sunshine of a perfect May day lit up and gave the finishing touch to a spectacle which has surely been unrivalled in modern times. Women of all ages and ranks combined in it to do honour to the Saint. Charming little girls, flower-crowned and carrying lilies; children dressed in the peasant dress of Joan's period; young maidens gowned in snowy white with flowing veils; women veiled in blue edged with gold; handsome matrons in black lace mantillas; and nuns of various orders helped to swell the ranks which numbered thousands. Amongst these were members of the Catholic Nurses' Guild and the French Red Cross in varying uniforms, many of them wearing war medals, and not a few the Mons Star. The central figure—St. Joan—was a perfect picture of girlish beauty and dignity. She won all hearts in the vast crowd of onlookers, this sweet maid of seventeen years. She sat astride her powerful white horse, which was caparisoned in blue grey cloth decorated with *fleur de lys*, and led by pages in mediæval dress. The slight figure with its hint of endurance clad in jerkin and heavy armour, the gold filet in her bright hair, the grace of her pose as she held aloft the white standard, was a worthy representation of the Saint in whose honour the vast mass of people had assembled.

Women who have a vocation for the religious life, and wish at the same time to train and continue to nurse the sick, may be pleased to know of the work of the Community of the Holy Rood, North Ormesby, Middlesbrough. The Sisterhood was established sixty years ago, and has been a nursing community from the first. The North Ormesby Hospital is a recognised training school (116 beds); soon it is hoped it will be enlarged; the training is thoroughly up-to-date, and many nurses trained there have obtained, and fill with credit, good positions in the hospital world.

The Sisters, who are all trained nurses, have always given their services in the hospital, and are glad to hear of ladies who wish for thorough training, combined with free church privileges.

There is little doubt that the very materialistic attitude towards nursing which has of late years animated many probationers, will react on the profession, and candidates inspired by altruism will hope to associate themselves with religious communities.

At the annual meeting of the Gloucestershire County Nursing Association it was stated that the shortage of nurses had become a source of acute anxiety to public authorities, the chief causes of the shortage being the low salaries offered to nurses, the absence of any provision of superannuation, and the difficulty experienced by nurses in securing comfortable lodgings or homes. The sub-committee had carefully considered the question of salaries, and recommended the County Council to continue the grant of £14 to each association whose nurses undertook health work, &c., as a minimum, to be increased, if necessary to a maximum up to one-half of the approved expenses if they were satisfied the nurse was receiving a suitable salary. It had been decided to increase the salaries of village nurses to £120 per annum, and fully-trained nurses to £140 per annum inclusive. A grant of £2,600 had been received from the county funds of the British Red Cross Society, conditionally on a scheme for its use being approved by the trustees of the county funds. It was proposed and approved that this sum should be invested and the income therefrom used in training additional nurses, and this had been done.

Mrs. Cooke Hurle spoke of the great shortage of nurses, which was to a great extent due to the very poor salaries offered and to the small prospect of advance in position.

Dr. Middleton Martin urged the provision of proper housing accommodation, and said he was anxious that nurses should be provided with pensions on reaching an age which made it impossible for them to continue their work.

The Queen Victoria Jubilee inspector paid her annual visit during the year, and sent a very favourable report. The committee wished to record their appreciation of Miss Milford's work as County Superintendent, which had been very trying owing to the shortage of nurses. An agreement had been made with Kingswood District Nurses' Home by which six beds were reserved for the training of nurse-midwives for the County Association, and this arrangement had so far proved very satisfactory, the Home being very comfortable and the pupils being thoroughly well trained and cared for. The report concluded with a summary of the work done by the superintendent.

How can the Gloucestershire County Nursing Association expect thoroughly qualified nurses when their pay is only £20 a year more than village nurses, whose training and experience is very limited? Much better to have expended the Red Cross grant in a substantial

increase of salary for thoroughly trained nurses than continue to pay for insufficiently training village nurses.

A course of special evening classes for trained masseuses desiring to take the Swedish Remedial Exercises certificate of the Incorporated Society of Trained Masseuses, is being arranged at the General Hospital, Birmingham, in preparation for the examination in July, 1921. The first class will be held on June 2nd, at 5.30 p.m., and the classes will be continued three times a week. The opportunity of taking this additional qualification is one which should not be missed. Intending pupils should apply immediately to the Matron.

Everyone is agreed that Miss Hill, the matron, and staff behaved splendidly when the alarming outbreak of fire was discovered at the Aberdeen Hospital for Sick Children. The matron and nurses were assisted by several medical students and about a dozen other men who came on the scene. In a very short time the children were out of reach of danger. On the Fire Brigade's arrival it was discovered that the outbreak had been caused by overheating in an old-fashioned stove of the laundry. A quantity of clothing in the laundry had caught fire, and the flames had spread to the woodwork, and had penetrated upwards to the Röntgen rays room. A good deal of damage was done to the laundry and the room above before the fire was extinguished. The children were taken back apparently none the worse for their exciting adventure. A new Children's Hospital is greatly needed in Aberdeen, the construction of the present building being out of date and difficult to work. No ward should be placed over a laundry—the risk of fire is too serious.

### THE 48-HOUR WEEK FOR NURSES.

We learn that a good deal of influence is being used throughout the country to influence hospital and institution nurses to vote against being included in the Hours of Employment Bill, and we have been asked to express an opinion on the question. (1) We approve of hospital and institution nurses being included in the Bill. (2) We disapprove of nurses in Private practice being included. Because hospital and institution nurses (especially probationary nurses) are not free agents and should be protected by the State as other workers are; and because Private nurses are free agents, and need not undertake more arduous duties than necessary, for any prolonged period; that is to say if they work on the co-operative principle, which they should do.

We advise every nurse to write to her member of Parliament, and give her reasons for or against inclusion.

## THE FLORENCE NIGHTINGALE CENTENARY.

### THE SERVICE IN WESTMINSTER ABBEY.

It is characteristic of the best work that it stands the test of time, and of those who build on sure foundations that their greatness is seen in truer perspective by posterity than by their contemporaries. From this rule even Florence Nightingale is not exempt for, though at the close of the Crimean War she was acclaimed as a popular heroine, her right to fame is not based upon her work for our soldiers in the Crimea, brilliantly successful though it was, but on the far more difficult task of laying the foundations of modern nursing.

So it came to pass that on the centenary of her birth, May 12th, 1920, those who took part in the service at Westminster Abbey, designed in her honour, were able to judge at its true value the indebtedness of the world to her greatness, and to estimate the forces which inspired her remarkable personality.

It seemed a fitting and appropriate thing that in the Abbey, where lies the dust of so many of the greatest of the sons and daughters of the Empire, and within a stone's throw of the hospital where she founded the training school for nurses which bears her name, that British nurses should assemble to do honour to her memory.

The choir, the space under the lantern, and the north and south transepts were well filled with a congregation composed mainly of nurses in uniform, those of the Nightingale Training School for Nurses being conspicuous by their indoor uniform, the Sisters in dark blue, with white pin-point spots, the staff nurses and probationers in blue and white striped galatea and blue-grey gingham respectively, with the neat spotted net cap always worn by the nurses of the School.

The brief special service included the Sixty-fifth Psalm, the Magnificat, the Nunc Dimittis, the anthem "Where Thou reignest, King of Glory, Throned in everlasting light," to Schubert's music, and the hymn "The King of Love my Shepherd is," sung with the exquisite finish which always characterises the music at the Abbey; the special Lessons selected were Isaiah 61 and St. Matthew 25, the words "He hath sent me to bind up the broken hearted," and "I was an hungered and ye gave me meat, I was thirsty and ye gave me drink . . . sick and ye visited me," calling to the remembrance of those present the vision of the slight resolute figure bending over the pallet beds in the fever-stricken wards of the Crimean hospitals, bringing healing and comfort, so that the sick and wounded men turned to kiss the shadow of Florence Nightingale as she passed by.

The Dean, Dr. Ryle, took as his text the twenty-ninth verse of Proverbs 31, "Many

daughters have done virtuously, but thou excellest them all."

There were, he said, in the nineteenth century three famous personalities who more than any others had contributed to the alleviation of suffering.

Simpson, the discoverer of anæsthesia, Lister, the author of the antiseptic system, and Florence Nightingale, the founder of modern scientific nursing.

The authorities of the Abbey welcomed the present opportunity of honouring Miss Nightingale's memory. When she died they offered to her family space for her interment within its walls, and later that her statue should be erected near to that of the great Lord Shaftesbury.

Since the appearance of her biography by Sir Edward Cook, we were in a better position to appreciate her character. Before that appeared it was supposed that Florence Nightingale at the time of the Crimean War turned her back on a brilliant social career to go to the help of the sick and wounded with gentleness and charity. The real woman—strong, resolute and of masterful intellect—was scarcely known, and was only revealed by her biographer. Our feelings were those of thankfulness that such a strong personality had been raised up to do her special work.

The preacher reminded those present that Florence Nightingale was the contemporary of Tennyson and Browning, Darwin, Gladstone, Salisbury, Beaconsfield, Mill, Shaftesbury, Pusey, Newman, Kingsley and Maurice. The nineteenth century was sometimes belittled, but an age which produced such men and such a woman was one of which future history need not be ashamed.

He recalled, with pleasure, that at the end of her long life she was decorated with the highest order which could be bestowed upon her (the Order of Merit), and said that the last fifty years of her life, which she spent as an invalid and a recluse, were not the least fruitful, the improvement of military barracks, and the health of the Army in India, being subjects with which she intimately concerned herself, as well as rural sanitation. She also devoted her energies to minute and industrious research. As a thinker and writer she was far above the average; she spoke, and spoke with authority, to Government Departments. Though her temperament was practical and businesslike, she delighted in mysticism.

The Crimean war was one of the turning points in scientific nursing; the people were excited at the want of care of the sick and wounded; the nurses available were in many instances undesirable. Then arose this fascinating new element, a strong and gracious woman, who, with the support of her friend, Sidney Herbert at the War Office, went out to carry out sweeping alterations. She succeeded, but at the cost of the sacrifice of her nerves and strength for the remainder of her long life. Later, by her steadfast

leadership, she effected what no one had ever done before, and transformed nursing from a menial calling to an honoured scientific profession. She insisted on more work, more study, and to-day we were proud of her name and rejoiced to carry on her traditions, which were not of a vapid sentimental kind, but of a strong forceful type. Her life was one of self sacrifice, yet of most imperious effort.

The country had cause to offer thanks to Almighty God for many brilliant and gifted women in the nineteenth century, but two of these, by their strength of mind and integrity of purpose, stood elevated above all others—Queen Victoria and Florence Nightingale. For these reasons he had chosen the words of his text. "Many daughters have done virtuously, but thou excellest them all."

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## NIGHTINGALE SCHOLARSHIPS.

The Nightingale Fund offers three Scholarships tenable for one year at King's College for Women, Campden Hill, London, beginning in October next.

The Scholarships, including board and residence at the College, will be of the value of one hundred and twenty-six guineas each and a further payment of £30 towards expenses will be made to each of the scholars.

The intention of these Scholarships is to assist their holders in qualifying for higher posts in the nursing profession.

The Scholarships are open to any nurse trained in the Nightingale School who possesses its certificate.

Intending candidates must send in their names to the Matron, St. Thomas's Hospital, on or before June 30th next; and all applications must state the age of the candidate, the date of the certificate held, together with a statement of the nature of the work the applicant has been engaged on since the date of the certificate.

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## THE HEALTH SERVICES BILL.

The Health Services Bill which is now being drafted by the Ministry of Health, will arouse great interest in nursing circles, as it is understood that the proposals under the consideration of the Government include further provision for the hospitals of the country, to give local authorities power to provide new hospitals where they are required, and to co-ordinate the work of all hospitals within a given area.

As nursing is one of the most indispensable departments in hospital management, the Nurses Organizations will no doubt carefully scrutinise the Health Services Bill when it is available. Let us hope Nursing Education will have been considered in this connection.



## FEVER NURSES' ASSOCIATION.

### ANNUAL MEETING.

The Annual Meeting of the Fever Nurses' Association, the first held since the war, was held on May 8th, at Croydon Town Hall. Prior to the meeting the members were entertained to luncheon by the Mayor of Croydon, G. Heath Clark, Esq. The President for the year, Dr. R. Veitch Clark, Medical Officer of Health for Croydon, delivered his Presidential Address on "The Future Development of Nursing in Relation to Medical and Public Health Work." The speaker advocated that in each town or district the whole of the available nursing service should be focussed into one central unit, and expressed his view that particular groups of diseases will require special hospitals. It has been computed, stated Dr. Veitch Clark, that in England alone 270,000 years of work were lost in one year owing to sickness, and that to reduce the duration of illness in the individual would be of incalculable value. The President also pointed out that there would be a need for much greater hospital accommodation in the future, and that this increase would of necessity mean that a larger number of trained nurses would be required, and he considered that the future for nurses was distinctly encouraging.

After the meeting the members were conveyed by motor char-a-bancs to the Croydon Borough Hospital, which was open for inspection, and tea was provided. Votes of thanks to the Mayor and the Corporation of Croydon for their kindness in granting the use of the Town Hall, and their generosity in entertaining the members, were passed unanimously.

The officers elected were:—Chairman of the Council: Dr. R. Veitch Clark; Hon. Treasurer, Dr. F. Foord Caiger, Medical Superintendent of the South Western Hospital; Hon. Secretaries, Miss M. Drakard, Matron of the Plaistow Fever Hospital, and Dr. J. Brownlee, of the National Institute of Medical Research.

### ANNUAL REPORT.

The Eleventh Annual Report of the Council recorded, with gratification, that one of the objects of the Association for which it has worked on the Central Committee for the State Registration of Nurses is at last an accomplished fact, the Nurses Registration Act having been placed on the Statute Book on December 23rd last. Also that two of the members of its Council (Dr. Goodall and Miss S. A. Villiers) have been appointed on the First General Nursing Council by the Minister of Health.

The total number of members on the Fever Nurses' Register is now 2,562.

Two examinations were held during the year, one in October, 1919, when 58 candidates entered and 53 were successful, one on April 14th last, the results of which are not yet to hand.

The Lincoln City Hospital, the Plymouth Borough Hospital, and the Middlesbrough Fever Hospital have been added to the list of Training

Schools, which conform to the Association's Scheme of Training.

The excess of income over expenditure is £37 2s.

The Council report that in consequence of representations made by them on behalf of the Association, a considerable improvement in the salaries paid to nurses in several of the provincial fever hospitals has been effected.

## SOCIETY FOR STATE REGISTRATION OF TRAINED NURSES.

Members are asked to note that, owing to the fact that the General Nursing Council for England and Wales will meet on May 28th, the

### ANNUAL MEETING HAS BEEN POSTPONED

until June 4th. It will be held at 431, Oxford Street, London, W., not at 11, Chandos Street, as originally announced.

## NATIONAL UNION OF TRAINED NURSES.

A social club will be opened at the Offices of the Union (46, Marsham Street, S.W.1) on June 12th.

The annual subscription of £1 to the Union will cover Club membership. Probationers in recognised Training Schools are accepted as Probationer Associates, and will be admitted to Club membership and to special Lectures. Annual subscription, 7s. 6d.

Light refreshments will be supplied at moderate charges, between the hours of 10 a.m. and 8 p.m. (Sundays excepted). Bedroom accommodation will be available at a small charge.

Programme of Lectures and Social Meetings will be announced at a later date.

## THE HOSPITAL WORLD.

Prince Albert, the President of the Queen's Hospital for Children, Hackney Road, E., presided at the Annual Meeting, at the Shoreditch Town Hall, on May 14th, when the Mayor expressed the pleasure of the inhabitants in welcoming the Prince to the Borough. Amongst those present were the Secretary of the Hospital, Mr. T. Glenton Kerr, the Matron, Miss A. M. Bushby, the Assistant Matron, Miss Bulteel, and the Home Sister, Miss Allen. In moving a vote of thanks to the Nursing Staff and other officials Mr. Joseph Meller (Chairman of the House Committee) made an eloquent appeal for more support for the Hospital.

Recently, the foundation stone was laid at Marseilles of a new hospital for sick or wounded British seamen on a very fine site. Queen Alexandra sent a telegram approving the good work, and added:—"We owe much to the brave men of our Mercantile Marine, and their devoted service during the war will always be remembered. I wish all possible success to the cause, and trust that your future appeal for funds will receive the support it merits."

## HONOURS FOR NURSES.

## ROYAL RED CROSS.

At the Investiture at Buckingham Palace on May 12th in the Quadrangle of the Palace, the King conferred the following decorations:—

## THE ROYAL RED CROSS (FIRST CLASS.)

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Mary James.

Territorial Force Nursing Service.—Miss Mary Bolderstone and Miss Mary Pool.

## THE ROYAL RED CROSS (SECOND CLASS.)

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Dorothy Allen and Miss Mabel Michell.

Territorial Force Nursing Service.—Miss Harriette Powell-Evans, Miss Mary Slaney, Miss Annie Sly, and Eva, Mrs. Ingram-Yelf.

British Red Cross Society.—Miss Annie Burr, Miss Charlotte Johnson, Miss Priscilla Roberts, and Miss Frances Waugh.

Civil and War Hospitals.—Miss Sarah Dagger and Miss Gertrude Spencer.

Voluntary Aid Detachments.—Miss Clare Bartholomew, Miss Helen Ellis, Miss Brenda Lea, the Viscountess Northcliffe, Miss Theresa Rice-Oxley, Miss Sylvia Wadhamstoll, Miss Julia Swanston, Miss Amelia Watt, and Gertrude, Mrs. Woolley.

Queen Alexandra received at Marlborough House the Members of the Military Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service), was also received by Her Majesty.

## AWARD TO NURSES IN IRELAND.

The King has awarded the Royal Red Cross to the following ladies in recognition of their valuable services in connection with the war. Dated July 31st, 1919:—

## ROYAL RED CROSS (FIRST CLASS.)

Miss G. L. Ball, A.R.R.C., Sister (Asst. Matron), Q.A.I.M.N.S.R., King George V. Hospital, Dublin; Miss B. M. Duff, A.R.R.C., Actg. Matron, Q.A.I.M.N.S.R., Mil. Hosp., Londonderry; Miss N. C. Stokes, Matron, Q.A.I.M.N.S.R., Mil. Hosp., Tipperary.

## ROYAL RED CROSS (SECOND CLASS.)

Miss F. J. Boyd, Sister (Actg. Matron), Q.A.I.M.N.S.R., Mil. Hosp., Londonderry; Miss S. E. Bradshaw, Sister, Q.A.I.M.N.S.R., Officers' Hosp., Holywood, Co. Down; Miss E. Conn, Sister, Mercer's Hosp., Dublin; Miss P. Curtin, Matron, Mater Infirmorum Hosp., Belfast; Miss J. Drew, Asst. Matron, Sir Patrick Dun's Hosp., Dublin; Miss M. Dunne, Staff Sister, Linden Aux. Hosp., Stillorgan, Co. Dublin; Miss S. F. H. Gilbert, Matron, Aux. Convalescent Hosp., Stillorgan, Co. Dublin; Miss M. H. Law, V.A.D., Adelaide Aux. Hosp., Dublin; Miss B. Leydon, Staff Nurse, Q.A.I.M.N.S.R., Central Mil. Hosp., Cork; Miss H. M. Lowe, Sister, Q.A.I.M.N.S.R., Central Mil. Hosp., Curragh; Miss F. M. O'Driscoll, Sister, Q.A.I.M.N.S.R., Spec. Mil. Hosp., Blackrock, Co. Dublin; Miss E. Scott, Sister, Q.A.I.M.N.S.R., Central Mil. Hosp., Belfast; Miss A. Sproule, Night Sister, Sir Patrick Dun's Hosp., Dublin; Miss E. M. Studdert, Matron, Q.A.I.M.N.S.R., Mil. Hosp., Fermoy, Co. Cork.

## HONOUR FOR DISTRICT NURSE.

Miss Edith Hall, the district nurse at Milton Regis, Sittingbourne, Kent, is one of the five English nurses to receive the decoration of the Order of St. Sava, granted by King Peter for distinguished services rendered with the Serbian Army in the retreat from Belgrade.

## APPOINTMENTS.

## LADY SUPERINTENDENT.

**Deaconess Hospital, Edinburgh.**—Miss S. S. Irvine Robertson has been appointed Lady Superintendent. She was trained at St. Bartholomew's Hospital, London, and at the Royal Hospital for Sick Children, Edinburgh, and has held the position of Ward Sister and Theatre Sister at the Royal Free Hospital, London. During the war she went out to Serbia with Mr. Berry, F.R.C.S., and Mrs. Dickinson Berry, as Matron of the Anglo-Serbian Hospital, and later held a similar position in the Anglo-Russian Hospital, Petrograd, and the Princess Club Hospital, Bermondsey.

## LADY SUPERINTENDENT NURSE.

**Belfast Infirmary.**—Miss Mary E. Campbell has been appointed Lady Superintendent Nurse. She was trained in the same institution, where she subsequently held the position of Charge Nurse for two years, Assistant Superintendent in the Convalescent Department for twelve years, and Assistant Superintendent in the Infirmary for the past four-and-a-half years.

## MATRON SUPERINTENDENT.

**Certified Institution, Stoke-on-Trent.**—Miss Elizabeth Kelso Scott has been appointed Matron-Superintendent. She was trained at the Royal Albert Edward Infirmary, Wigan, and under the Scottish Branch of Queen Victoria's Jubilee Institute, and has been Head Nurse and Deputy Matron of the Midland Counties Institution at Knowle, Warwickshire, Assistant Matron at a Hospital near Glasgow, Matron at Craig House, Royal Edinburgh Asylum, and Matron at the Midland Counties Institution, Knowle.

## MATRON.

**Birmingham Maternity Hospital.**—Miss Edith A. Meikle has been appointed Matron. She was trained at the Royal Alexandra Infirmary, Paisley, and has been Staff Nurse and Maternity Ward Sister at St. Mary's Hospital, Wakefield, Night Superintendent, Clayton Hospital, Wakefield, Ward Sister, Royal Alexandra Infirmary, Paisley, Maternity Sister and Assistant Matron, Royal Nursing Association, Nightingale Home, Derby.

**Edmund Potter Hospital, Bolton.**—Miss Florence Whitfield has been appointed Matron. She was trained at the Clayton Hospital, Wakefield, and has been Staff Nurse and Holiday Sister at the Royal Infirmary, Sheffield, and has been Ward Sister, Night Sister and Theatre Sister at the Bolton Infirmary, to which the Edmund Potter Hospital is an auxiliary hospital.

**City Hospital, Liverpool.**—Miss Lily Holland has been appointed Matron. She was trained at Toxteth Infirmary, Liverpool, and subsequently held the position of Sister. She has also been Night Superintendent at the City Hospital, East Liverpool, and Deputy Matron of the City Hospital, South.

**East Riding and City of York Sanatorium, Raywell, Cottingham, Hull.**—Miss G. E. Sharpe has been appointed Matron. She was trained at the Royal Infirmary, Sunderland, where she subsequently held the position of Sister. She has also been Sister at the Middlesbro' Tuberculosis Hospital; Night Superintendent and Home Sister at the Manchester Sanatorium, Timberley, Cheshire; Home Sister at the Middleton Sanatorium, Ilkley, Yorkshire, and Matron of the Auxiliary Military Hospital, Mirfield.

**Bartlet Convalescent Home, Felixstowe.**—Miss A. R. Bunch has been appointed Matron in the above institution, not of the East Suffolk and Ipswich Hospital, Ipswich, as we reported last week in accordance with information officially supplied to us. The Bartlet Convalescent Home is in connection with the East Suffolk and Ipswich Hospital.

## QUEEN VICTORIA'S JUBILEE INSTITUTE

## TRANSFERS AND APPOINTMENTS.

Miss Mary A. Cracknell is appointed to Windsor (Maternity Branch) as Superintendent; Miss Ada Dicks to Darfield; Miss Evelyn M. Gaunt to Tipton; Miss Lucy A. Hopkins to Greasley; Miss Lilian R. Kimmons to Tipton; Miss Sarah J. MacDermott to Usworth; Miss Eva McIlroy to Enfield; Miss Isabella MacKilligan, to Maidenhead.

## OVERSEAS NURSING ASSOCIATION.

## NEW APPOINTMENTS.

Seventy new appointments have been made by the Overseas Nursing Association since October, 1919, and we regret that we have not space to insert them all, as the Association is doing extremely valuable work in selecting well-trained nurses for service in our Crown Colonies and elsewhere.

## MATRON.

**Presten Hospital, Gold Coast.**—Miss M. C. Roxburgh has been appointed Matron. She was trained at University College Hospital, London, and her previous service includes Plague duty at Zanzibar, Sierra Leone, Colonial Hospital, Antigua, and Matron at Holberton Hospital and Colonial Hospital, Trinidad.

**Gibraltar, Colonial Hospital.**—Miss E. Bridges has been appointed Matron. She was trained at the Royal Alexandra Hospital, Rhyl, and her previous service includes duty in British Guiana and Superintendent of Nurses at Georgetown Public Hospital.

**German East Africa Government Hospital.**—Miss J. Fraser has been appointed Matron. She was trained at Glasgow Western Infirmary, and her previous service includes duty at British Guiana, Georgetown Public Hospital, Matron at Bahamas General Hospital, and of the Bangkok Nursing Home.

**Fiji Colonial Hospital, Suva.**—Miss M. F. West has been appointed Matron. She was trained at Kingston Infirmary, Surrey.

## SUPERINTENDENT OF NURSES.

**Nigeria (Northern Provinces Government Hospitals).**—Miss L. M. Walker has been appointed Superintendent of Nurses at Berbice Hospital. She was trained at the Birmingham Infirmary, and previous service includes duty at British Guiana, Georgetown Public Hospital.

## SISTER-IN-CHARGE.

**Cyprus Government Hospital.**—Miss A. B. Drewe has been appointed Sister-in-Charge. She was trained at West Norfolk and Lynn Hospital. Previous service includes duty with Ceylon Nursing Association, in N. Eastern Rhodesia, Fort Jamestown, Sierra Leone, Freetown Nursing Home, Southern Nigeria Government Hospitals, Presten Hospital, Gold Coast, British East Africa Government Hospitals.

## NURSE MATRON.

**Tehran Hospital.**—Miss B. N. Oxley has been appointed Nurse-Matron. She was trained at Westminster Hospital, London.

## COMING EVENTS.

*May 26th.*—The Trained Women Nurses' Friendly Society. Annual General Meeting, 431, Oxford Street, London, W. 5 p.m.

*June 4th.*—Society for State Registration of Trained Nurses. Annual Meeting. 431, Oxford Street, London, W. 4.30 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## IGNORANCE OR ANIMUS?

*To the Editor of THE BRITISH JOURNAL OF NURSING.*

MADAM,—It is a pity the writer of the article on Florence Nightingale in a recent issue of the *Daily Telegraph* should have exposed her ignorance—or indulged her animus—by making the misleading statement that the College of Nursing "is to set the examinations and establish the register that will place the calling (of nursing) on the same professional level as medicine and the law." It is both ill informed and untrue.

These powers have been conferred by Parliament on the General Nursing Councils set up by the Nurses Registration Acts. It is unpardonable that the public and nurses should be so misinformed, when reference to the Nursing Acts will prove the fact beyond dispute. Such statements should be officially contradicted by the College Council.

Yours truly,

HENRIETTA HAWKINS.

## KERNELS FROM CORRESPONDENCE.

## "DICKIE NO SHOES."

*Another F.F.N.C. Sister.*—"Presumably when the children of our wicked foes are being pampered in 'the land of the free,' they will be provided with boots and other necessities. How about the orphans of our dead soldiers—many of whom are short of food and bootless? Did you read of poor 'Dickie No Shoes,' the little son—one of five children—of a hard-working widow, whose 'factory wages did not exceed 25s. a week,' summoned at Tottenham for not sending him to school?

It came out the little chap was sent barefoot to school and his poverty jeered at, so that the poor mother 'had not the heart to send her son to school.' It makes my blood boil to think such people are indirectly taxed 'to entertain' alien enemy children in England! I agree with you absolutely that the Government have no right to permit German children to be brought here. Why should we not let our M.P.'s know how we women feel about it?"

[Certainly let them know.—ED.]

[For want of space much correspondence is held over till next week.—ED.]

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*May 22nd.*—What are the usual causes of gallstones? Describe the preparation of a case for operation, and the subsequent nursing.

*May 29th.*—Flatulence after operation; give causes and treatment.

# The Midwife.

## MATERNITY AND CHILD WELFARE.

The General Purposes Committee of the London County Council reported to that authority on Tuesday, May 11th, that the Lewisham Metropolitan Borough Council in 1917 recommended that the undermentioned duties should be delegated to the metropolitan borough councils. (1) The local control and supervision of midwives under the Midwives Act, 1902. (2) The powers under the Children Act, 1908, relating to infants and young children who are nursed and maintained for reward. (3) The inspection of lying-in homes under the London County Council (General Powers) Act, 1915.

As the proposal was very controversial the Committee postponed its further consideration until after the war. In the interval, by the passing of the Midwives Act, 1918, the Council has ceased to have authority to delegate its powers under the Midwives Act, 1902, the powers of supervising the administration of Part I of the Children Act, 1908, have been transferred from the Home Department to the Minister of Health, and the position of the Metropolitan borough councils in relation to maternity and child welfare have been strengthened by the passing of the Maternity and Child Welfare Act, 1918.

The Committee recommended that for a period of one year, subject to review of the whole position at the end of that period (1) that the Council's infant life protection visitors (other than inquiry officers) be withdrawn within the area of the Metropolitan Borough of Lewisham. (2) That there be delegated to the Lewisham Metropolitan Borough Council the powers of the Council relating to the inspection of lying-in homes, on condition that in any case in which a nurse registered in respect of a lying-in home is a midwife there shall be joint inspection by officers of the Council and of the Borough Council.

The recommendation was carried.

We are glad that the position is subject to review at the end of a year, and regret that the recommendation has been carried. In our view the wider the area covered by inspectors the better. Local politics are apt to influence the appointment and the views of local inspectors, nor is the work always sufficient to employ a whole-time official and, consequently, the best qualified people may not apply.

Again, the right of delegating its powers has been withdrawn from the London County Council by the Midwives Act, 1918, in regard to the local control and supervision of midwives permissible under the 1902 Midwives Act, and, as was reported by the Public Health Committee of the L.C.C. to the Ministry of Health in September last: "The

registered persons in respect of seven out of twenty lying-in homes in Lewisham are midwives. Under the Midwives Act, 1918, the Council is precluded from delegating its powers under the Midwives Acts, so that inspectors of midwives, who are officers of the Council, must continue to visit at these seven homes if the Council's powers with regard to lying-in homes are delegated. In order that each authority may be fully cognisant of the whole of the work for which it would be responsible, it is suggested that in any case in which a midwife is the registered person in respect of a lying-in home, there should be joint inspection by officers of the two authorities."

This joint inspection appears to be unnecessary, irritating, and costly to the ratepayers.

## THE DEVELOPMENT OF THE WORK OF MATERNITY AND CHILD WELFARE.

In the House of Commons on May 12th, Mr. Waterson asked the Minister of Health if he is aware that many municipal authorities find it impossible to develop the work of maternity and child welfare as it ought to be developed because of the heavy financial burden it entails; and, under such circumstances, he can make any recommendations to the Government for financial assistance to carry out a national obligation, and from which the State will benefit thereby?

Dr. Addison replied: The Government already distribute through my Department a grant of half the expenditure of local authorities and voluntary agencies on maternity and child welfare.

## CENTRAL MIDWIVES' BOARD.

### EXAMINATION PAPER. MAY 4th, 1920.

1. Where is the female bladder situated?  
What conditions can give rise to incontinence of urine during pregnancy and the puerperium?
2. What is meant by "pendulous belly"?  
What may be the effect of this on the course of labour, and how is it best dealt with?
3. A baby vomits. How would you proceed to investigate the cause, and how would you treat it before obtaining medical aid?
4. A primigravida engages you for her confinement. She is thirty-six weeks pregnant. What would lead you to suspect the presence of a contracted pelvis, and how would you prove it?
5. How does the abdominal and vaginal examination differ in a case of occipito-anterior and occipito-posterior presentation?
6. How do you recognise syphilis in the pregnant woman? For what other conditions is it necessary to send for medical help during pregnancy?

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## EDITORIAL.

### THE JOINT COUNCIL OF THE B.R.C.S. AND THE ORDER OF ST. JOHN OF JERUSALEM.

It will be remembered that on the outbreak of war in 1914 there were two corporations authorized to engage in relief work among the sick and wounded men of His Majesty's Forces, namely, the British Red Cross Society and the Order of St. John of Jerusalem.

In order to co-ordinate the activities of these two bodies, and to avoid waste and overlapping, it was found expedient to "pool" their funds and their efforts, and what is known as the Joint War Committee was formed, with a Joint Finance Committee, under which the voluntary work of relieving the sufferings of His Majesty's Forces has been carried out during the last six years.

Since the Armistice the Joint War Committee has been engaged in carrying on certain of its war departments, including—

The care of the sick and wounded men of His Majesty's Forces, whether still on the sick list or demobilised.

Such care as may still be necessary for those who have been prisoners of war.

Assistance to orthopædic clinics, and curative posts for the treatment of pensioners.

Home service ambulance organization.

In a statement setting out these facts Queen Alexandra, President of the British Red Cross Society, and the Duke of Connaught, Grand Prior of the Order of St. John of Jerusalem in England, express the view that there are also other branches of work which can usefully be undertaken in time of peace by the Order of St. John and the British Red Cross Society, such as:

The care of those suffering from tuberculosis, having regard in the first place to sailors and soldiers, whether they have contracted the disease on active service or not.

Assistance, financial and otherwise, to the Voluntary Civil Hospitals, in view of the strain put upon these hospitals by the war.

Work parties to provide the necessary garments, &c., for hospitals and health institutions.

Child welfare work.

Assistance where required in all branches of nursing, health and welfare work, ancillary to the Ministry of Health.

As the Joint War Committee was created only for work in time of war the two corporations have now, by a formal agreement, established a Joint Council, on which both bodies have equal representation. This Council possesses under the old charter of the Order of St. John, and the extended charter of the British Red Cross Society, power to act in all matters connected with "the improvement of health, the prevention of disease, and the mitigation of suffering throughout the world."

For the branches of work mentioned in the first category the Joint War Committee will continue to provide the necessary funds, wholly or in part, but an appeal is made for money for all the other work of the Joint Council, and an income of £1,000,000 per annum is aimed at to be distributed in the form of grants, supplementary to the individual efforts of the hospitals, and the other welfare agencies. If the confidence of trained nurses is to be secured they must be assured that they will be given the professional recognition to which they are entitled, and that the responsible charge, under the medical profession, of all branches of nursing, health and welfare work will be placed in their hands.

This the Joint War Committee omitted to do during the War.

Any new form of organisation set up where the services of professional nursing is indispensable should be controlled by a special Nursing Department, supervised by an experienced Nurse Administrator. This plan is proving of great value in connection with the American Red Cross, which also hopes to extend its activities in the field of preventive work and civil hospital relief.

## OUR PRIZE COMPETITION.

WHAT ARE THE USUAL CAUSES OF GALL-STONES? DESCRIBE THE PREPARATION OF A CASE FOR OPERATION AND THE SUBSEQUENT NURSING.

We have pleasure in awarding the prize this week to Miss A. M. Douglas, University College Hospital, Gower Street, W.C. 1.

### PRIZE PAPER.

The chief causes for the formation of gall stones are: (1) Sedentary occupation and over-eating; (2) Pressure (as in wearing of tight clothing, tumours, or pregnancy); (3) Catarrh spreading to bile passages from the intestines; (4) Microbic infection of the bile ducts or gall bladder (*B. Typhosus*, *B. Coli*, and the less virulent forms of streptococcus, &c).

The pressure causes stagnation of bile, and pigments are deposited, round which excessive mucus collects. The mucus changes chemically into cholesterol, a crystalline substance which surrounds the nucleus (either mucus, epithelial, or microbic). The stones may resemble fine gravel, in which case there may be several hundred, moulded so that they fit together; or a single stone even as large as a goose egg may be found.

### PREPARATION OF A CASE OF GALL STONES FOR OPERATION.

*General.*—Second day before operation give purge (castor oil  $\frac{3}{4}$ ); first day before operation, saline aperient mane s.o.s. Light diet. Morning of operation, large soap and water enema. Breakfast (light), beef tea ( $\frac{3}{4}$  x), four hours before operation. Hyp. Inj. Atropine sulph. 1-100 grain (to be charted by surgeon) half an hour before.

*Skin Preparation.*—Thoroughly wash and shave the skin over the liver, paint with Iodine, or apply antiseptic, compress and bandage.

*Mouth Preparation.*—If possible carious teeth should be previously removed or stopped, and a mouth wash must be given just before the patient is sent to the operating theatre.

If the nurse only reaches the case the day before the operation an enema should take the place of the usual purge.

In case of chronic jaundice the surgeon usually orders subcutaneous injection of Horse serum, 20-30 c.c., or calcium chloride in 3 doses for twenty-four hours before operation; these are continued per rectum for two days afterwards. The object of these injections is to coagulate the blood, as hemorrhage is likely to be a complication.

For the operation the patient should be clothed in a split flannel gown fastened at the back and long woollen stockings. A sand-bag

or "rest" should be placed under the back to raise the liver, and the table is usually raised 35deg. at the head in order to cause the intestines to gravitate away from the wound. The right arm may be placed under the mackintosh or in an arm rest at right angles to the table.

Adrenalin should be near at hand in case of hemorrhage.

When the patient returns to bed he must be placed flat until he recovers consciousness and kept warm by means of hot water bottles; later he is placed in the Fowler's position. It is most important that the knee bolster should be firmly tied, and the patient not allowed to slip down in bed. The after treatment in cholecystectomy (excision of gall bladder), cholecystenterostomy (making a permanent opening between the gall bladder and intestine), may be indicated as follows.

Usually a drain is inserted into the gall bladder or duct, if there is no infection this may be removed on the third day, and the stitches on the tenth.

If a drainage tube is inserted it is connected by a glass connection to a long piece of tubing which is placed in a bottle tied to the bed in which the bile collects, which is removed on the seventh to tenth day. The bile is measured and a specimen saved. The skin round the wound must be kept covered with an antiseptic ointment, as the bile is very irritating. A drain is also usually inserted into the peritoneal cavity in all cases, and this can be removed on the third day, if there is no infection.

*Diet.*—Fluids until bowels are open. Then light and nourishing diet, fats being restricted.

*Bowels.*—Soap-and-water enema morning after operation; second day, calomel, followed by saline aperients.

The temperature, pulse, and respiration should be charted four-hourly while stitches are in. A specimen of urine should be kept daily, and stools reserved for inspection.

*Complications.*—Hæmorrhage (apply pressure with gauze soaked in adrenalin).

*Broncho-Pneumonia and Pleurisy.*—To prevent this keep patient in semi-sitting position.

*Incisional Hernia.*—All fat patients should wear abdominal support for some months.

*Biliary Fistula.*—Due to obstruction, which will necessitate another operation.

### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss P. Thompson, Miss M. Stevens, and Miss J. James.

### QUESTION FOR NEXT WEEK.

Flatulence after operation: give causes and treatment.



## THE NECESSITY OF TEACHING NURSES DENTAL HYGIENE.

By RAY R. REED, D.D.S.  
*Bay City, Michigan.*

Text books for nurses contain very thorough instructions in the art of giving sponge, tub, and spray baths, infants' cleansing baths, and washing the hair, which is all very well and essential. Little or no instruction, however, is given the nurse in the care of patients' teeth. With our present knowledge of focal infection and its relationship to systemic diseases does not negligence in this line become a serious problem. At least three-fourths of the patients in hospitals need dental prophylaxis, the other one-fourth could profitably stand it. If apparently healthy persons develop secondary infections through focal infection, a patient suffering from a wasting disease or an acute condition, would certainly be more susceptible to disease, and the focal infection would be more potent. X-rays of devitalized teeth of patients suffering from an acute disease show rarefaction, or the attenuation of the bone due to infection. The same teeth on X-ray, subsequent to the illness, show little or no rarefaction at the root ends.

It is true that patients in hospitals give little or no attention to their teeth. This is partly due to the fact that enough emphasis is not laid upon this treatment by the physicians and nurses. The ideal procedure is that carried on by the University of Minnesota hospital. Each patient on entering is provided with a tooth brush. The nurses are trained efficiently to instruct the patients in the care of their mouths, and some are trained to do instrumentation to remove coarser calculus or tartar. Mouths presenting an advanced degree of pyorrhea and an abundant flow of pus are first scrubbed up with a piece of sterile gauze. At this time the nurses demonstrate the proper use of the tooth brush, demonstrating in their own mouths to make it more effective. Wonderful results can be obtained in this manner. The flow of pus can be checked and the puffy and irritated gums nursed back to a semi-healthy state. It is true that the primary irritant, the calculus, cannot be removed in this manner, but the injury which it produces can be reduced to the minimum. By teaching nurses the art of instrumentation, the coarser deposits are removed and the delicate instrumentation necessary in pyorrhea treatment is later done by the dentist. The tooth brushes, with dust shields, are hung in a conspicuous place at the head of the bed, being a daily reminder for diligent use.

Co-operation must be obtained between the

medical and dental professions so that dental surgeons are permanently employed in all hospitals. Surgical cases then, especially, should present healthy mouths at the time of operation, not only for the safeguarding of the patient against possible secondary infection, but also to increase his recuperative power. By healthy mouths, I do not mean simply prophylaxis in the sense of treating pyorrhea, but more important, the removal of all abscessed teeth.

The great menace, tuberculosis, is to-day very efficiently handled by sanitariums and public donations; yet the Bureau of Vital Statistics shows that in the year 1915, 98,000 people died of tuberculosis in all its forms, while 105,202 people died of heart diseases. In the year 1916, 101,396 lives were destroyed by tuberculosis and 114,171 from heart diseases. On account of the developments in the treatment of tuberculosis there has been a decline from 200.7 per 100,000 in 1907, to 141.6 in 1916, a decrease of almost thirty per cent.

What has been done to control heart disease? It is true that heart disease, to a very large extent, is preventable by proper mouth sanitation. The masses of streptococcus viridans, in dental abscesses, on tooth surfaces, in pyorrhea pockets, and tonsillar crypts, enter the circulation and localize in the heart valves, producing disease. This is only one phase of the destructive action of the streptococcus, not dealing with gall-bladder disease, arthritis, neuritis, nephritis, and many other conditions of possible focal origin. How much simpler would it be to control these diseases than tuberculosis? What small expense is connected with the treatment of a disease producing more deaths than tuberculosis and which is on the increase!

It is true that the patients in the hospitals present a very small percentage of these cases, but when suffering from other ailments they present the most susceptible group. As I have said before, the treatment is simple and is threefold: (1) Co-operation between medical and dental professions; (2) Establishing of a dental department in hospitals; (3) Training of nurses in dental hygiene.

The nurse's part in this great work is a very important one. It is she who comes in intimate contact with the patient and can instruct and watch the patient perform his dental toilet. It would be impossible for one man to accomplish that which the nurse could be trained to handle so efficiently. Let us then strive to give the patient a fair chance and make use of the knowledge which we now possess. Let us prepare our nurses with the proper training necessary in carrying on this important work.

—*The American Journal of Nursing.*

## NURSING ECHOES.

The Annual Meeting of the Society for the State Registration of Trained Nurses will be held at 431, Oxford Street, London, W. 1, on Friday, June 4th, at 4.30 p.m. Members are asked to note this date, and also that the meeting will not be held at 11, Chandos Street as usual. It is hoped that members will endeavour to attend this meeting, when the future work of the Society will be discussed.

Miss Eleanor Barton, who recently resigned the position of Matron of the Chelsea Infirmary, has withdrawn her resignation.

Miss Annie Smith, late Matron of the Infirmary, Kingston-on-Thames, has been granted a superannuation allowance under the Poor Law Officers' Superannuation Act (1864) of £93 6s. 8d.

Mr. and Mrs. Noel Buxton are issuing invitations to an "At Home," at 12, Rutland Gate, S.W. 7., on Friday, June 4th, at 3.15 p.m., to meet the Rev. Harold Anson (Chairman of the Guild of Health), who will speak on "The Mental and Spiritual Factors in the Healing of the Sick." Discussion and questions are subsequently invited. The objects of the Guild are (1) the study of the influence of spiritual upon physical well-being, (2) the exercise of healing by spiritual means in complete loyalty to scientific principles and methods, (3) united prayer for the inspiration of the Holy Spirit in all efforts to heal the sick, (4) the cultivation through spiritual means of both individual and corporate health. The headquarters of the League are at 6, York Buildings, Adelphi, W.C. 2.

The receipts of the recent *matinée* in aid of the Nurses' Home Fund of the Great Northern Central Hospital (held at the Palladium, which was kindly lent by Mr. Charles Gulliver) exceeded £1,400.

A judgment recently given by Judge Atherley Jones, K.C., in the City of London Court is of interest not only to the general public, but also to nurses.

Mr. J. J. Gibaud claimed fifteen guineas against the Great Eastern Railway Company, the value of a bicycle deposited in the Enfield Town Station cloak room on September 2nd, which they had lost.

The Company had given the plaintiff a ticket on which it was stated that they would not be

responsible in respect of any article deposited, the value whereof exceeded £5, unless at the time of deposit the true value and nature of the article should have been declared, and 1d. per pound sterling of the declared value be paid for each day or part of a day, in addition to the ordinary cloak room charges.

The Judge found for the plaintiff, with costs on the higher scale because of the importance of the case, and held that the condition was unreasonable, and therefore no protection to the railway company.

Presumably the last has not been heard of this question, as last December, at Birmingham, Judge Amphlett, K.C., decided against a nurse who claimed £54 against the London & North-Western and Midland Railway Companies for a lost suit case under precisely similar conditions.

The West Sussex County Nursing Association report a successful year, although there is still a dearth of suitable candidates. The superintendent reported that there were now fifty-six affiliated districts. Fifteen had been affiliated since April, 1919. The total number of nurses employed by the W.S.C.N.A. was seventy. Of these nine were Queen's; thirty were nurse midwives with approved hospital and district training; twenty-seven were nurse midwives with approved district training; three were certified midwives; and one was a certified midwife with an additional fever training. Since April 1st, 1919, nine candidates having completed their training, were placed on districts; seven were at present in training; three nurses were transferred to other districts; and six health visitors and seven nurses resigned during the year. It will be seen that out of a staff of seventy, only nine are qualified nurses, the remainder being midwives with a little nursing experience.

At the annual meeting of the Monmouthshire Nursing Association, the same cry, scarcity of nurses, was heard.

Lady Mather-Jackson, the honorary secretary, stated that the results had not come up to her expectation. The greatest difficulty had been experienced with regard to the rural districts, as nurses who had served in the war did not seem willing to undertake district work, consequently some districts which had nurses for many years were feeling exceedingly the loss of their services.

Fully-trained nurses had been started in the districts of Crumlin, Abercarn, Cwmarn, and Rhydney, and good reports of their

work had come to hand. They in that county were fortunate in having their own training centre for midwifery, and in receiving most generous support from the County Council. In addition to the midwives trained at their Tredgar centre, they had also trained two pupils in general district work during the year. This, however, was not nearly enough, and they would have to resort to other measures to obtain a sufficient supply of nurses for the rural districts.

Our desire is to see thoroughly trained nurses, with the addition of the C.M.B., provided for the sick poor in rural districts. This can only be done by offering them much higher salaries than the so-called nurse-midwives are satisfied to accept.

A late member of the staff of the Registered Nurses' Society, now married and living in Finland, who has recently been in a hospital in Viborg for a serious operation, writes that all the staff are very interested in English methods of nursing. No one could speak English except a surgeon and the Matron, but fortunately the night nurse could speak Russian, which she understood. She writes that the rooms for private patients are ideal—the colour scheme and all the arrangements designed to please the eye. The inclusive charge is 25 marks a day, the value of the mark being 60 to 80 to the English £1. The children's ward Sister describes as "perfectly sweet" a big round room with a large stove in the middle for ornament only, as the whole place is steam heated and beautifully ventilated. "What the English hospitals would save in work if they only knew!" Then around the top is a frieze of figures just like a nursery, all in green and white. Each ward has its own dressing room and bath room, as no dressings are done in the wards except those of very bad cases. There are about four large operating theatres and a Röntgen-Ray room, and huge bath rooms for every imaginable kind of bath, as well as rooms for massage, radiant heat, and orthopædic work. The whole thing is kept up by the Government.

The nurses receive no salaries for the first two years, but there are plenty of applicants for probationers' posts; "they do not have to slave as they do in England." In the hospital in Viborg there is a delightful dormitory at the top of the building for the Sisters and Nurses. The doctor told our correspondent that the Sister who was looking after her was as clever as any surgeon—she assists him every day at his

operations, as there are only a few surgeons in Viborg. Sister writes that she has never been so well looked after.

It is proposed to hold a representative Conference of the Irish Nurses' Union in Dublin next month. This body is in favour of a forty-eight hours' week for private nurses, and a special committee of the Union is being set up to collect and express the views of private Nurses on the matter, while information is also being collected as to the institutional aspect. The *Irish Citizen* offers a prize of 5s. each for time-tables suggested by its readers for applying an eight-hours' day, or a forty-eight hours' week, or ninety-six hours' fortnight, to their own hospital.

## NURSES' REGISTRATION.

A new generation has arisen since the proposals for the State Registration of Nurses took shape over thirty years ago, and there may be members of the General Nursing Councils who have not studied the history of the question; such members would be well advised to acquaint themselves with the Blue Books dealing with this question, principally those dealing with the House of Lords Inquiry into the management of the Metropolitan Hospitals in 1891, and the reports of the proceedings of the Select Committee of the House of Commons on Registration of Nurses in 1904 and 1905. In addition, there are the Acts providing for the Registration of Nurses in our Colonies, the nurses of which, under our own Acts, may be registered in the United Kingdom on reciprocal terms. The first Act to deal with the Registration of Nurses was the Medical and Pharmacy Act of the Cape of Good Hope in 1891, and the first to deal with nurses in a separate Act, the New Zealand Nurses Registration Act of 1901.

The whole history of the movement for the State Registration of Nurses in the United Kingdom is to be found in the *NURSING RECORD* and the *BRITISH JOURNAL OF NURSING*. For the benefit of the nursing profession a complete file of this journal has been placed in the Nursing Library of the International Council of Nurses, in the Board Room of the Registered Nurses' Society, at 431, Oxford Street, London, W. 1. Members of the General Nursing Councils will be given facilities for studying these reports if they wish to do so at the above address.

## CONGRATULATIONS FROM THE CANADIAN NATIONAL ASSOCIATION OF TRAINED NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MY DEAR MRS. BEDFORD FENWICK,—I am directed by the President of the Canadian National Association of Trained Nurses to convey to you the hearty congratulations of the nurses of Canada, on the passage of the Nurses' Registration Bill. The courage, determination, and self-sacrifice displayed by the British Nurses in their struggle to obtain professional recognition will remain an abiding example and inspiration to their sisters in all parts of the world.

Very cordially yours,

ETHEL JOHNS,

Secretary Canadian National Association of  
Trained Nurses.

Vancouver General Hospital,  
Vancouver, B.C.

April 29th, 1920.

## AN IMPRESSIVE CEREMONY.

Short, simple and deeply impressive was the ceremony, says *The Canadian Nurse*, which took place in the wide corridor just outside the Legislative Chamber of the Parliament Buildings, Toronto, when the memorial tablet to the memory of the nurses of the Ontario Military Hospital, Orpington, England, who gave their lives during the war, was unveiled by Major Margaret C. MacDonald, R.R.C. Matron-in-Chief of the Canadian overseas military forces.

His Honor the Lieutenant-Governor and his family and many persons of note attended the ceremony.

Present for the occasion were the near relatives of the heroines whose names appear on the tablet: Nursing Sister Mary McKenzie, formerly of Toronto, who was drowned in the sinking by the enemy of the hospital ship *Llandoverly Castle*; Nursing Sister S. E. Garbutt, who went overseas for service in June, 1917, and died of cancer the following August; Nursing Sister M. Lowe, of Binscarth, Manitoba, who was killed during the bombing outrages at Etaples in May, 1918; Nursing Sister D. H. Baldwin, who died as a result of wounds received during the enemy raids at Douzens, France, in May, 1918; and Nursing Sister M. E. Greene, who died of double pneumonia, at No. 24 British General Hospital, Etaples, France, in October, 1918.

Hon. Dr. H. J. Cody, former Minister of Education, read the memorial service and dedicated the tablet, erected by the matron and nursing sisters of the Orpington Hospital unit "to the glory of God and in loving memory."

The tablet, of brass, mounted on an ebony frame, has been placed on the wall immediately to the east of the entrance to the Legislative Chamber.

## INTERNATIONAL NEWS.

At the Nursing Conference held at Atlanta, U.S.A., last month, the following officers of the Executive Committee of the International Council of Nurses were present and conferred:—Miss Jean Gunn, President, Canadian National Association of Trained Nurses, who acted as secretary *pro tem.* and kept the Minutes in the absence of Miss L. L. Dock; Baroness Mannerheim, National Council of Nurses of Finland; Miss Charlotte Munck, of the Danish National Council, and Miss Clara D. Noyes, R.N., President of the American Nurses' Association.

Applications for federation with the International Council were received from National Associations of Nurses from Belgium, Italy, and Norway, which can only be finally accepted in full meeting.

The members felt it was too soon to plan for an International Congress; they thought the world situation is not yet sufficiently settled, and that it will be well to wait until all countries have returned to a more tranquil state.

Meantime the next biennial of the American Nurses' Association will occur in 1922 on the Pacific Coast in Seattle, and it immediately occurred to Miss Dock that perhaps the Americans could invite informally there, the Far Eastern members who cannot easily come to distant meetings—Australians, New Zealanders, Indian, Japanese and Chinese nurses. Miss Dock writes: "This picture filled me with lively joy, and I anticipate having a very delightful occasion in Seattle with the nurses from across the Pacific Pond! Doesn't that seem attractive and easy? So in spite of the Minutes I look forward to a *semi* meeting. Perhaps dear Hester Maclean could come and Miss Gretta Lyons."

The Minutes record the conclusion that the next regular Congress should be held in some neutral country or in the eastern part of the United States.

One item of information gives us "lively joy"—Miss Dock will remain Hon. Secretary of the International Council until its next Meeting, which will be a notable one for us, as we shall meet our colleagues as duly registered professional women.

A meeting of retired members of Q.A.I.M.N.S. and demobilised members of Q.A.I.M.N.S. Reserve and of the Territorial Force Nursing Service will be held in the Grand Hall, St. Thomas's Hospital, on Tuesday, June 1st, at 3 p.m., to elect a representative to serve on the sub-committee of the United Services Fund. It is hoped to obtain a grant from the Fund for the benefit of the members of these Services.

## GENERAL NURSING COUNCIL FOR SCOTLAND.

The General Nursing Council for Scotland is advertising for a Secretary at a salary of £400. We hope a highly-trained and experienced Nurse will be selected, following the example of the Council for England and Wales. As trained Nurses are financing their own Registration Schemes they should fill the senior official posts.

## NATIONAL INSURANCE.

### NEW RATES IN FORCE AFTER JULY 5th.

The National Health Insurance Bill, which has just received the Royal Assent, makes important changes in the benefits and contributions under the Health Insurance Scheme, to operate from July 5th next, and is of interest to nurses.

The object of the changes is to provide for an increase in the rates of benefits in view of the fall in the value of money. The normal rate of sickness benefit will be raised from 10s. to 15s. a week in the case of men and from 7s. 6d. to 12s. a week in the case of women; disablement benefit will be raised from 5s. a week to 7s. 6d. for both men and women; and the amount of maternity benefit will be raised from 30s. to 40s.

In order to provide for the increase of benefits the joint weekly contribution is to be increased from 7d. to 10d. in the case of men, and from 6d. to 9d. in the case of women, of which the employer's portion will normally be 5d. in each case. In certain cases where low wages are paid the employer will pay a larger and the worker a smaller portion of the joint contribution.

The contributions cards from the week beginning July 5th next must in all cases be stamped at the rate of 10d. a week for men and 9d. for women. Stamps of these values will be on sale at the Post Offices.

## HIGHER PAYMENT OF PANEL DOCTORS.

The Ministry of Health announces that the arbitrators fixing the remuneration of medical practitioners under the Insurance Acts have determined the award of the capitation fee per insured person at 11s. per annum. This is not to include any payment in respect of the supply of drugs and appliances, nor any payments to meet those special conditions of practice in rural and semi-rural areas which are covered by the payments to be made out of the Central Mileage Fund.

## HOURS OF EMPLOYMENT BILL.

The Hours of Employment Bill introduced last session by Sir Robert Horne to give effect to the recommendations of the Provisional Joint Committee of the National Insurance Conference has been redrafted by the Ministry of Labour, and will be brought in at an early date and pressed through all its stages.

## ARE YOU LIVING IN AN OLD SHOE?

### CONTRIBUTOR MAKES PLEA FOR PLENTY OF FRESH AIR AND SUNSHINE.

By MISS M. HASTINGS,

*Public Health Nurse of the Manitoba Provincial Board of Health.*

"There was an old woman who lived in a shoe,  
She'd so many children she didn't know what  
to do!"

Some shoes are very small—they cramp one, and they are dark inside; so are some homes. Why didn't the old woman get out? Lots of room outside! Why was she old, with lots of children? She just stayed in, and became "Martha-ish." Then, the story goes on, at the end of a perfectly awful day, when her nerves were worn to a frazzle, "she spanked them all round and put them to bed." No; she didn't wash their tired little hands and faces, or undress them leisurely by the glowing stove; no little prayers; no fairy tale, as they lay snugly a-bed, to speed them off to dreamland. My dear Mrs. Manitoba, where are your babies? Are they all tucked away for the winter in the dark shoe? Lots of room outside—fresh air, too! It must be fresh, because most of the stale air is shut up in the homes. Windows were first made for two purposes—to admit light and to admit air.

Our windows are usually made in two parts; there is a wooden sash in the middle. This seems to have been put there for Mrs. Manitoba to measure by, so that her blinds shall be all evenly down half way! Why waste your glass for the upper half! Who wants the sunlight in? Set the geraniums on the window-ledge; they must have sunlight, or they will become pale and not blossom; and they will be so useful to keep the sunlight from "Little Willie." Stay! that is not enough. Drape the windows generously with net or scrim.

We must save money. Certainly, but yes, my friend! We must economise. Mrs. Palem's Compound costs so much! Dr. Chasem's Nerve Soother has gone up in price. Let us load up the medicine cupboard and the kitchen cabinet with cough mixture and Squealer's Soothing Syrup. Those ancient Greeks who worshipped Apollo, the sun god, and brought the sick out into the sunlight for his gift of healing, were heathen! We are enlightened. One feels sorry for the baby who arrives late in the year and is likely to be shut in all winter, but sorrier for the little two-year-old and four-year-old. How they patter eagerly to the door when they hear a knock! I think it must be to get a glimpse of the big, unfamiliar out-of-doors. There are dull, cold days, with wind, when perhaps wee folk are best at home; and there are babies who have no comfortable, warm carriage or wrappings. One wishes a kind fairy would come along for them. Oh! you shut-in mothers, I wish I could sing, with the Spring poet:

"Come out, come out, my dearest dear,  
Come out and greet the sun;  
For all the world is out but you,  
And winter's nearly done."

A man was asked to count the number of babies on S— Avenue one afternoon. He counted quite a number and was doubted. Being merely a man, he said they all looked alike to him. It was discovered he was counting the same six babies over again.—From *The Canadian Nurse*.

## KILL FLIES AND SAVE LIVES.

Kill at once every fly you can find and burn his body.

Kill the flies and save lives!

### RECIPES FOR KILLING FLIES.

The United States Government makes the following suggestion for the destruction of house flies: Formaldehyde and sodium salicylate are the two best fly poisons. Both are superior to arsenic. They have their advantages for household use. They are not a poison to children; they are convenient to handle; their dilutions are simple, and they attract the flies.

### PREPARATION OF SOLUTIONS.

A formaldehyde solution of approximately the correct strength may be made by adding three teaspoonsful of the concentrated formaldehyde solution, commercially known as formalin, to a pint of water. Similarly, the proper concentration of sodium salicylate may be obtained by dissolving three teaspoonsful of the pure chemical (a powder) to a pint of water.

A container should be arranged convenient for automatically keeping the solution always available for flies to drink. An ordinary, thin-walled drinking glass is filled, or partially filled, with the solution. A saucer, or small plate, in which is placed a piece of white blotting paper cut the size of the dish, is put bottom up over the glass. The whole is then quickly inverted, a hatch placed under the edge of the glass, and the container is ready for use. As the solution dries out of the saucer the liquid seal at the edge of the glass is broken and more liquid flows into the lower receptacle. Thus the paper is always kept moist.

### OTHER SIMPLE PREVENTIVES.

Any odour pleasing to man is offensive to the fly, and *vice versa*, and will drive them away.

Take five cents' worth of oil of lavender, mix it with the same quantity of water, put it in a common glass atomizer and spray it around the rooms where flies are. In the dining-room spray it lavishly, even on the table linen. The odour is very disagreeable to flies, but refreshing to most people.

Geranium, mignonette, heliotrope and white clover are offensive to flies. They especially dislike the odour of honeysuckle and hop blossoms.

According to a French scientist, flies have

intense hatred for the colour blue. Rooms decorated in blue will help to keep out the flies. Mix together one tablespoonful of cream, one of ground black pepper and one of brown sugar. The mixture is poisonous to flies. Put in a saucer, darken the room, except one window, and in that set the saucer.

To clear the house of flies, burn pyrethrum powder. This stupefies the flies, but they must be swept up and burned.

## AN ABSURD ASSUMPTION.

Evidently, to judge from editorial comments in No. 2, we have touched the lay editor of *The College of Nursing Bulletin* on the raw, by expressing the opinion that if this publication desires to rank as a professional paper, it must be edited by a professional woman. No amount of silly arguments to the contrary will alter this fact. As well contend that the *B.M.J.* or *Lancet* could wield professional influence if edited by a layman. We will leave it at that. Members of the nursing profession with a sense of professional responsibility, who do not intend to submit to ignorant dictation, have their own organ in *THE BRITISH JOURNAL OF NURSING*, owned, controlled and edited by experienced nurses.

## THE HOSPITAL WORLD.

During their stay at Aldershot the King and Queen paid a visit to the Cambridge Hospital where they were received by Colonel H. C. R. Hine, and the Matron, Miss E. M. Lyde. They went through the wards and were very warmly cheered by the convalescents as they said good-bye.

If the voluntary hospitals are to continue useful the demands of science have to be met—and science is costly. The old rule-of-thumb treatment which met the needs of medical treatment fifty years ago, is a thing of the past. Money must be found so that evolution may be conducted on the right lines. We must have an A1 standard of national health, and money must be found to establish it. We are all for constructive co-operation. Teach the people the value of health in happiness and commerce, and provide a system whereby they can pay for it. Surely this is not beyond the powers of Civil Service organisation. The great Morant and his coadjutors at the Ministry of Health no doubt had their plans. Let us have them put forth for discussion. Schemes of Health Welfare, Prevention of Sickness, and hospitals we must have. But standards of health and treatment of sickness are no longer the business or pleasure of the philanthropist and his satellites. They are the first duty of the People, and the State. Charity has had its day—it must make way for co-operation.

We are glad to note that rich Birmingham is looking after ex-Service men. The Treasury have



agreed to make a grant of £25,000 towards the cost of important extensions contemplated at the High-bury and Uffculme Hospitals, the first given by Mr. Austen Chamberlain to the citizens of Birmingham for the hospital treatment of ex-service men, and a gift for a like purpose made by Mr. and Mrs. Barrow Cadbury, of the house known as "Uffculme." The furnishing of both those residences was generously undertaken by the employes of Messrs. Kynoch. Towards the cost of alterations and extensions a grant of £10,000 was made by the Joint Committee of the British Red Cross and the Order of St. John. It is hoped that with these sums, together with £5,000 to be found by the citizens of Birmingham, it will be possible to provide 320 beds at the two hospitals, up-to-date operation theatres, treatment and electrical rooms and gymnasium, with the necessary heating and water supplies, and provide the requisite accommodation for the increased resident staff.

Sir L. Worthington-Evans stated recently in the House of Commons that the number of soldiers who during the war became totally deaf through shell shock or other causes could not be stated, but approximately 30,000 had been pensioned for deafness of greater or less degree. Medical Boards were instructed to recommend a course of tuition in lip-reading where this degree of deafness was such as to render this desirable. Lip-reading classes were held in London at the Ministry's aural clinic (28, Park Crescent, Regent's Park) and at thirty other centres throughout the country.

A public appeal will be issued shortly for the necessary funds for a new nurses' home at the Royal Infirmary, Liverpool. The matter has been under consideration for some time, and it is becoming urgent.

## THE PASSING BELL.

### A GREAT PROFESSIONAL EDITOR.

It is with deep regret that we record the death from cerebral hæmorrhage, at her summer home, Forest Lawn, N.Y., on April 27th, of Miss Sophia F. Palmer, Editor-in-Chief of the *American Journal of Nursing* from its foundation. Miss Palmer, who was descended from John and Priscilla Alden, began her professional career at the Massachusetts General Hospital in 1876, when Miss Linda Richards was Superintendent of Nurses, and retired from active nursing work, when Superintendent of the City Hospital, Rochester, N.Y., to make the editing of the *American Journal of Nursing*, which she had carried on for nine months with her other work, her chief occupation; for when American nurses established their professional journal they naturally sought a distinguished nurse as editor. Miss Palmer attended the Congress of Nurses at the World's Fair, Chicago, in 1893, and the Meeting of the International Council of Nurses in London in 1909. She was First President of the New York State Board of Nurse Examiners, holding this office

during the constructive period, when principles were established which have since been applied in all registration work in the United States of America. The *American Journal of Nursing* states that "there was not a nursing interest in the country in which she had not a part, either actively or as an adviser. Her loss will be felt in every branch of the profession; our best memorial to her is to carry forward in the best and highest sense the work to which she gave her life."

## APPOINTMENTS.

### MATRON.

**War Memorial Maternity Home, Borough of Wandsworth.**—Miss E. E. Wearing has been appointed Matron. She was trained at the Liverpool Hospital for Women, and has been Staff Nurse at the District Nurses' Home, Plaistow; Ward Sister at the Chelsea Hospital for Women; and Matron at the Ilford Urban District Council Maternity Home.

**Royal Victoria and West Hants Hospital, Boscombe.**—Miss Betty Walker has been appointed Matron. She was trained at the Lambeth Infirmary, and has served as a member of Queen Alexandra's Imperial Military Nursing Service Reserve; and was for three years Matron of the Military Hospital, at Prees Heath; Sister and Matron's Assistant at the Royal Infirmary, Bristol; Matron of the Cottage Hospital, Warminster, and Matron of Parc Wern Auxiliary Hospital, Swansea. She has been mentioned in dispatches and awarded the Royal Red Cross (First Class).

**Batley and District Hospital.**—Miss Helen Gardner has been appointed Matron. She was trained at Ancoats Hospital, Manchester, where she subsequently held the positions of Sister, Theatre Sister and Assistant Matron. She has been Home Sister and Theatre Sister at the Victoria Hospital, Blackpool; and Matron of the Malton and District Hospital.

### SISTER.

**Grosvenor Hospital for Women, Vincent Square, S.W.**—Miss Mary E. Aston has been appointed Theatre Sister. She was trained at the Middlesex Hospital, and been Ward Sister and Theatre Sister at the Norwood Cottage Hospital, and Assistant Home Sister at the Middlesex Hospital.

Miss M. B. Johnson has been appointed Sister in the same institution. She was trained at the Dreadnought Hospital, Greenwich, and the Hospital for Women, Soho Square; and been Sister at the Staffordshire General Hospital, and at the Bedford County Hospital.

## THE NURSING AND MIDWIFERY CONFERENCE.

Nurses and midwives should make a note of the dates June 22nd to 25th, on which the Nursing and Midwifery Exhibition will be held (as in pre-war days) in the fine large Horticultural Hall in Vincent Square, London, S.W. The Exhibition will be open from noon to 9 each day. The Conference will be held in a room upstairs, and will be restricted to two days:—June 23rd, Nursing, and June 24th, Midwifery. It is hoped also to arrange some interesting professional exhibits. Tickets for the Exhibition and Conference will be sent free to nurses and midwives applying to the Secretary, 22-24, Great Portland Street, London, W., enclosing stamped envelope.

## BOOK OF THE WEEK.

## WARD TALES. \*

This peep behind the scenes of V.A.D. life in the home hospitals, written, presumably, by "one of themselves," will be read with great interest by the nursing world. It naively unfolds the point of view of the V.A.D. which, while it in many respects corresponds with that of the civilian "pro," assumes a self importance which in the last-named damsel is generally kept in the back of her mind, otherwise she might have a bad time of it. We recognise, of course, that this is a chronicle of V.A.D. experience only, otherwise we might be tempted to suppose that the trained nursing staff was of secondary importance, at any rate in the eyes of the patients.

For example—

"The senior V.A.D. was alone in the ward. Sister Renton had left for her evening off, and the staff nurse in the twin ward of B.4 on the other side of the long corridor, rarely came across unless the girl really required her help.

"This was Peggy Vaughan's happy hour, the happiest in a happy day, for the wards were her life, and her 'boys' filled her every thought. She loved her thirty grown-up babies. She knew in her heart that here was her true vocation, and these evenings when her little kingdom was all her own were hours of complete happiness.

"To-night she clucked over her big brood like any little mother hen."

The reader will wonder if Peggy has been true to the vocation now that the glamour has been removed. It is to be hoped she has, for she seems a nice little girl.

The chapter headed "A Conference on the Powers" is illuminating.

"First year of the war I remember writing to a fearful swagger matron, and I just *grovelled* on the chance of getting abroad to do some real work. She answered it. She said there wasn't the *slightest* chance of any untrained woman ever *smelling* France, much less nursing there, but if I were a good girl and waited long enough, I could doubtless do some quite good work helping the real nurses at home. Reads a bit funny now, doesn't it?"

Henson, who had been bombed in France and torpedoed in the Mediterranean, grinned appreciatively.

"Quite funny, really, but there is a side to it that isn't funny, you know, Podgie. There was such lots of enthusiasm at the beginning, and yet everyone got so choked off that it isn't much wonder that they have to appeal and appeal all the time for more V.A.D.'s. They're all gone to do other kind of war work where they aren't treated like pariahs." Then she proceeds to utter a bit of sound common sense. "It does seem as if the War Office people ought to have had a bit more foresight. Then they could have worked at some plan for a definite war-time training

for us, not left us to work out our own salvation, as most of us have had to do."

"What I can't fix up is this," said Henson. "We haven't any sort of *guarantee*. Remember when I was on night duty in B.4, Podgie? *I had a big ward absolutely on my own with heavy surgicals.*" (The italics are ours.) She goes on to relate how, in the next ward, she is set to wash walls and polish floors, and then, "Sister Perkins likes me, and as the staff nurse is a lazy sort of girl, *I do staff nurse work if I like.* That's what I can't stick, and that's where the blessing of a three years' certificate comes in, for they can't play up the trained people like that."

Henson apparently is unconscious that the three years' certificate carries with it other advantages.

Pamela, in her turn, relates a disgusting scene which took place in a marquee of sick coloured men.

"I yelled at them in Serbian, then I made them hop into one bed—they went like lambs and I just bumped their two frizzy heads together till they rang. Give me a nice rowdy surgical block with nobody too ill in it to enjoy the fun. We *have* had some days" We imagine, indeed it is to be hoped, that Henson has since discovered that perhaps after all she had no vocation, but it would not be fair criticism to leave the reader to suppose that the predominant note of the book was the rowdyism described in this chapter.

Here is a picture that will appeal to night nurses and reveal the strain of responsibility on an untried girl.

"At the small hours of the morning her restlessness increased. She knew the symptoms only too well. By every means at her disposal she fought the terror which invaded her mind, and strove to keep at bay the oppression that filled it. Half-past one struck and she moistened her dry lips. God! how long the night was. Picking up her book she read desperately for a few minutes, listening for a sound that never came."

The nameless dread found its justification later when the exhausted girl was told "My leg's kinder funny. I think its bleedin'."

The book teems with incidents grave and gay connected with ward and staff routine. It is brightly written and very readable. The sympathies of the reader are constantly enlisted, either for the patients or on behalf of the war probationer, who at any rate seems to have fared no better than her civilian sister in regard to creature comforts.

The remark of Medenway, "I don't eat nowadays, I just stoke," will find echo no doubt in more than one hospital.

The V.A.D. uniform comes in for its share of opprobrium.

"Cheap and nasty, like the rest of the outfit," said Henson. "I'd like to get hold of the woman who invented this rig and ring her yellow neck."

Presumably the author is "demobbed."

Candid criticism is always refreshing and for this reason and others the book is to be commended.

H. H.

\* By E. Chivers Davies. John Lane, Bodley Head.

# GENASPRIN

*Brand of acetyl-salicylic acid.*

From *THE LANCET*, Jan. 4, 1919.

## GENASPRIN.

GENATOSAN, LTD., 12, CHENIES ST.,  
LONDON, W.C. 1.

The purity of acetyl-salicylic acid is of importance if its dissolution is required to be deferred until the drug reaches the alkaline intestinal juice. We found neither free salicylic nor acetic acid in this preparation. The tablet disintegrates satisfactorily in water, and gives absolutely no violet colouration with ferric chloride. On adding 0.2 per cent. hydrochloric acid, representing the acidity of the gastric juice, there is still no response to the iron test, slight hydrolysis only taking place after several hours. The claim is substantiated that this preparation is a particularly pure specimen of acetyl-salicylic acid.

*On receipt of  
your professional  
card, we will  
send abundant  
clinical samples.*



## OUTSIDE THE GATES.

## WOMEN'S PAPERS.

The high price of printing and paper does not appear to have damped the ardour of women in entering the field of newspaper production. The *Woman's Leader* (62, Oxford Street, W.1), with which the *Common Cause* is incorporated, has recently been launched as the organ of the "National Union of Societies for Equal Citizenship," price 2d., and is excellently produced; and now the Time and Tide Publishing Co., Ltd., have issued a fourpenny weekly to be known as *Time and Tide*. The aim of its promoters is to establish a journal which shall be at once readable and interesting, and which, while it does not confine itself to any one field, but comments on or records any events of passing interest, yet takes special notice of certain matters hitherto slightly neglected. The chairman of the Board is Mrs. Chalmers Watson, C.B.E., M.D., the vice-chairman, the Viscountess Rhondda. We wish all success to the new venture.

## A WORD FOR THE WEEK.

To-day is your day and mine; the only day we have; the day in which we play our part. What our part may signify in the great world we may not understand, but we are here to play it, and now is our time.—*David Starr Jordan*.

Decision of character outstrips even talent and genius in the race for success in life.

When the outlook is not good, try the uplook.

## VERSE.

If you were busy being kind,  
Before you know it you would find  
You'd soon forget to think 'twas true  
That someone was unkind to you.  
If you were busy being glad,  
And cheering people who are sad,  
Although your heart might ache a bit,  
You'd soon forget to notice it.

—REBECCA D. FORESMAN.

From *The Canadian Nurse*.

## COMING EVENTS.

May 28th.—Guy's Hospital Past and Present Nurses' League. Twentieth Annual Meeting and Twelfth Annual Dinner. Nurses' Home, Guy's Hospital. 7 p.m.

May 29th.—Royal British Nurses' Association. Lecture on "Civic Duties and Responsibilities," by Councillor Beatrice Kent. 3 p.m. Presentation to Miss Margaret Breay. Tea.

June 4th.—Society for State Registration of Trained Nurses. Annual Meeting. 431, Oxford Street, London, W. 4.30 p.m.

June 5th.—Royal British Nurses' Association. "Grind" on "The Procedure of Conducting Business Meetings." Mrs. Bedford Fenwick. 3 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## PRIVATE NURSES AND CO-OPERATION.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—In a paragraph of your issue of the 22nd inst., re the "Forty-eight Hour Week for Nurses," you say:—

"We disapprove of nurses in private practice being included . . . because private nurses are free agents, and need not undertake more arduous duties than necessary, for any prolonged period; that is to say, if they work on the co-operative principle, which they should do."

I can assure you that private nurses are in no way free agents. So long as there is an age limit fixed by Associations and Limited Liability Companies for the nurses they take on their staffs, so long will nurses be slaves. The age limit is from thirty to thirty-five, and as soon as it is passed the Superintendents can sweat their nurses as much as they like, as they know they cannot leave and join other institutions.

I can tell you of cases where nurses, ill, tired and over-worked, are *compelled* by their Associations to take work when they are not able for it. There are few private nurses who cannot give it as their practical experience. If they persist in their refusal to take a case, the Superintendent can, and often does, penalise the delinquent by keeping her two, three or four weeks without work.

Yours faithfully,

MAUDE MACCALLUM,  
Hon. Secretary Professional  
Union of Trained Nurses.

[We expressed the opinion from personal experience as Hon. Superintendent of the Registered Nurses' Society (co-operative) for twenty-five years, and we repeat that, if working on really co-operative principles, private nurses are free agents, in so far as any workers can be. We do not consider it possible for many trained nurses to make a living in private practice if they are included in the Hours of Employment Bill—that is, that they may not work for more than forty-eight hours a week. *The public will not employ them*; but will make shift, perhaps to their detriment, with a less skilled attendant, especially as only well-to-do people can now afford private nurses. A really comprehensive scheme of sickness insurance must first be organised for the middle and upper classes before private nurses can do justice to their patients and work for only forty-eight hours a week. This is the opinion of a very large majority of private nurses whom we have consulted on the question. At the same time, there is little doubt that the majority of Nurses' Co-operations are so only in name.—ED.]

## SHOULD WE BE TAXED TO BRING GERMAN CHILDREN TO ENGLAND?

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Seeing that we have been taxed to starve German children for months after their fathers and brothers had stopped fighting, we must surely, even those of us who are "mothers of the dead," be willing to pay taxes to succour and show what hospitality we can to the surviving children.

I am sure it must be painful to many readers of your admirable paper to see that you take the opposite view—a view which at one time we might, in our conceit, have called "un-English" or "un-British."

Yet, perhaps, we have no right to show hospitality to German children while we neglect our own. There is, however, nothing but our lack of goodwill and intelligence to prevent our caring for both.

Yours truly,

ARTHUR ST. JOHN.

"Glenyards,"  
Bonnybridge, Scotland.

[We regret to differ in opinion with Captain St. John, whose work for the improvement of our prisons and penal system has our warm admiration. But we do emphatically differ from his views on the question under discussion, and moreover, with few exceptions, we express the opinion of the readers of this journal. We are of opinion that there has been deplorable mishandling of the Germans since the futile Armistice—not altogether "British," either in its inspiration or application—and that the peculiar psychology of the German race would have responded to and benefitted by a policy robustly just and British, rather than by any mawkish sentimentality, which is the antithesis of generosity. We are discussing the treatment of the children of a race of criminals—a people who plotted for years a holocaust of murder by fire, sword and bomb, for gain; who raped "religious"; debauched women and children; crucified, spat upon, starved and infected helpless prisoners; made crew yards of chateaux, and devastated by theft and mischief the fair lands of our Allies. To forget these things and their tragic results in a twinkling of an eye is by no means commendable; it is proof of lack of mental and moral stamina. We claim that, if the children of these criminals are suffering, it is the result of their parents' misdeeds. It is the great Law—mercifully more ruthless than any human law.

We believe in heredity, and for that reason we strongly protest against hospitably entertaining the children of the German race in England. What succour they need—in the name of humanity—let them be given in their own country. In this connection, the suffering of many of our own children—as the result of the war—is very considerable. We should prefer more space devoted to their needs in our daily press than to the huge whole-page advertisements of the needs of alien

emies. We ask again, who is paying for this extensive campaign of publicity? *The cost of it has now run into thousands of pounds.*—ED.]

## MISREPRESENTATION SHOULD BE CORRECTED.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—I am very glad to see that attention has been drawn in the Journal to the mis-statement in the *Daily Telegraph* referring to powers stated to have been conferred by Parliament on the "College" as a Registration body. I wrote to the Minister of Health when I read the article, and his reply showed that the position had been mis-represented. No disclaimer from the "College" seems to have yet appeared, such as one would have expected.

Yours faithfully,

M. L. B.

## KERNELS FROM CORRESPONDENCE. NURSES PURPOSELY MISLED.

*Miss Annie Glover*: "I am glad Miss Hawkins has drawn attention to the misleading statement in the *Daily Telegraph* with regard to the College of Nursing, Ltd., being the registration authority. In a reply from the Minister of Health I am informed that 'the General Nursing Council is responsible under the Nurses' Registration Act, 1919, for the formation of the Register.'"

[We consider it is much to be regretted that nurses should be confosed on this point by ignorant journalists in the lay press.—ED.]

## REGISTRATION BAR.

*Miss D. E. Horn (Southsea)*:—"I think the idea splendid for a bar for State Registration for the members of the S.S.R. of T.N. Could not members of the R.B.N.A. attach it by a narrow band of ribbon to the bar of their badges?"

*Miss Elizabeth Martin writes*:—"As a member of the Society for State Registration of Trained Nurses, I quite agree with Sister Martha, and think we certainly deserve some mark. Her suggestion, I think, too, is very nice; namely, that of a "Bar" etc.

*Miss M. Davies (Cardiff)*:—"I should love to have a Registration bar. I thank 'Sister Martha' for her suggestion. Now all the strain is over, I feel quite dull. Lucky we got all our propaganda through before letters cost 2d!"

[If the bars had pins attached, they could be easily worn; the matter will be discussed at the Annual Meeting on June 4th.—ED.]

## OUR PRIZE COMPETITIONS.

### QUESTIONS.

May 29th.—Flatulence after operation; give causes and treatment.

June 5th.—What is blood? What is its composition? What causes it to clot?



# The Midwife.

## CENTRAL MIDWIVES' BOARD.

The monthly meeting of the Central Midwives' Board was held in the Board Room, 1, Queen Anne's Gate Buildings, Westminster, on Thursday May 20th, Sir Francis Champneys presiding.

### REPORT OF THE STANDING COMMITTEE.

In the Standing Committee, which met, previously, Dr. Fairbairn raised the question of reconsidering the conditions on which approval of midwives as teachers is granted, and also the question of arranging for courses of training for midwives seeking approval as teachers.

The Committee recommended, and the Board agreed, (a) that the Approval Sub-Committee be asked to consider and report on a scheme for the further instruction of teachers; (b) that Dr. Griffith be added to this Committee for this purpose.

A letter was received from Mr. E. H. Phillips of the Ministry of Health, enclosing a copy of a letter received from the Ministry of Labour, with reference to the shortage of facilities for training for the examinations of the Central Midwives Board, and asking for the observations of the Board upon the matter.

It was resolved that a reply be sent to the Minister of Health in the terms of a draft letter submitted by the Chairman.

A letter was considered from Miss R. E. Squire, of the Training Department of the Ministry of Labour, reporting complaints by pupil midwives with regard to the conditions under which an Approved Midwife conducts training, and in connection therewith the report from the Medical Officer of Health.

It was resolved that the midwife in question be informed of the accusations, and that she be invited to show cause why she should not be removed from the list of Approved Teachers.

A letter was considered and signed by all the Examiners at the Birmingham Centre, suggesting (a) that the number of examiners at the Birmingham Centre be increased from six to eight; (b) that John Furneaux Jordon, F.R.C.S., and William Alexander Potts, M.D., be appointed examiners; (c) that in view of the decreased value of money, the Examiners' fees be increased.

It was resolved to accede to (a) and (b) and, in regard to (c) that the Examiners at the Birmingham Centre be informed that if they will forward to the Board a request from the Examiners at all the Examination Centres that the fees be increased, with reasons therefor, the Board will favourably consider such request.

A letter was received from the County Medical Officer of Health for the County of Essex asking the Board to consider (on the grounds more par-

ticularly mentioned in the letter) the advisability of midwives inserting in their Registers of Cases all cases attended by them whether as midwives or as monthly nurses.

It was resolved that the County Medical Officer of Health for Essex be informed that the Board, having carefully considered the proposal, regrets that it feels unable to recommend the change suggested by him.

A letter was considered from the Director of Lands and Accommodation with reference to the question of the Board removing its offices to the Fourth Floor of No. 1 Queen Anne's Gate Buildings.

It was further resolved that the Director of Lands and Accommodation be approached with a view to the Board being permitted to continue the occupation of the Fifth Floor at the present rent, and otherwise on the terms contained in the Agreement for the lease of the Fourth Floor as far as they are appropriate to such occupation.

### APPLICATIONS.

The following applications were granted:—

*For Approval as Training School.*—King Edward VII Hospital, Cardiff.

*For Approval as Lecturer.*—Isaac Bernard Barclay, M.R.C.S., D.P.H., Hugh John Couchman, M.B., John Ralph Dingley, M.R.C.S., Charles Noon, F.R.C.S.

*For Approval as Teacher, by Certified Midwives.*—Cecilia Ada Howie (No. 49,253), Millicent Eliza Tansley (No. 40,617), Daisy Frances Tough (No. 25,780).

*From Five Certified Midwives on the Scottish or Irish Rolls* to be certified by the Board under Section 10 of the Midwives Act, 1918. Granted on payment of the fee of one guinea. A sixth application was refused.

*For Voluntary Removal of Name from the Roll.*—From three Midwives.

A fourth application was not granted.

### PENAL CASES.

A special meeting of the Central Midwives' Board for hearing charges alleged against certified midwives, was held on Thursday, May 20th.

*Struck off the Roll and Certificate cancelled,* Martha Buckley (No. 9778), Janet Glover (No. 17802).

*Judgment Deferred* (Report of L.S.A. to be asked for in three and six months' time), Mary Clark (No. 13180).

*Cautioned* (Report of L.S.A. in three and six months' time,) Emily Olliff (No. 19000).

*Cautioned,* Ann Ellen Jones (No. 8070).

The name of Eliza Slade (London) was restored to the Roll.



# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
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EDITED BY MRS BEDFORD FENWICK

No. 1,679.

SATURDAY, JUNE 5, 1920.

Vol. LXIV

## EDITORIAL.

### A CONSTRUCTIVE HEALTH POLICY.

The Consultative Council on Medical and Allied Services associated with the Ministry of Health, of which Lord Dawson of Penn is chairman, has now issued an interim report. The Council was invited by Dr. Addison, on its formation, to consider the problem of forming a systematised medical service, established on a local basis, but applicable, area for area, to the whole country.

It emphasises the failure of the present organisation of medicine to bring the advantages of medical science within reach of the people, and points out that medical treatment, while becoming more effective, tends at the same time to become more complex, so that it grows increasingly more difficult for the individual practitioner to administer the full range of treatment.

The Council lays it down that any scheme of medical service must be open, though not necessarily free, to all classes of the community; that it must be such as can grow and expand and adapt itself to varying local conditions, and that, in each locality, it must comprise and provide for all the medical services, preventive and curative, necessary to the health of the people all these agencies being brought together in close co-ordination under a single health authority for each area.

It is pointed out that at the centre of the medical service of the country lies the treatment which the medical practitioner gives to his patient—either at his own surgery, or at the patient's private house. It is contemplated that this domiciliary medical service should continue, but that all such service should be brought into relationship with a Primary Health Centre, which would serve as the rallying point of all the

medical services, preventive and curative, of the district for which it was established.

So far as midwives and nurses are not available in particular districts, under other arrangements, their services could be provided from a centre. A dental clinic, with a staff of visiting dental surgeons, would be another important branch of the equipment.

The Secondary Health Centre of each district would be situated in a town, where an efficient staff of consultants and specialists could be assembled, and would be within access of all the Primary Health Centres in the area. This centre should be brought into touch with the Teaching Hospital, which would be found in some large city; to this would be sent cases of unusual difficulty from Secondary and Primary Health Centres.

The need for a new type of local health authority to administer the scheme in each district is pointed out, on which body it is proposed that the medical profession should have due representation, assisted by a Local Medical Advisory Council. In our opinion it is also essential to the success of such a scheme that the nursing profession should similarly have due representation.

The alternative of a whole-time salaried service for all doctors, which has been carefully considered, is not approved, the Consultative Council being of opinion that the public would be serious losers, as the clinical worker requires knowledge, not only of the disease, but of the patient. It believes "it is a true instinct which demands 'free choice of doctor.'" In no calling is there such a gap between perfunctory routine and the 'best endeavour,' that the latter "would not be obtained under a whole-time State salaried service, which would tend by its machinery to discourage initiative, to diminish the sense of responsibility, and to encourage mediocrity."

## OUR PRIZE COMPETITION.

### FLATULENCE AFTER OPERATION: GIVE CAUSES AND TREATMENT.

We have pleasure in awarding the prize this week to Miss Winifred M. Appleton, University College Hospital, Gower Street, W.C. 1.

#### PRIZE PAPER.

Flatulence (word derivation *L. flatus*, a blowing), an excessive formation of flatus, is a collection of gas or air in the stomach or intestines causing distention of those organs.

Excessive flatus may be the result of dyspepsia, deficiency or excess of hydrochloric acid, or deficiency of pepsin. Neurosis of stomach and bacterial fermentation are other causes. Medicinal treatment may have to be employed in these cases.

Tympanitis is the term used to describe the distention of the abdomen by the accumulation of gas and air in the intestines.

In operation cases, particularly in abdominal section, flatulence is usually relieved when the bowels are open, and a simple soap and water enema is invaluable.

Some surgeons recommend the administration of a turpentine enema,  $\frac{1}{2}$  oz. to 1 oz. turpentine, thoroughly mixed with gruel or starch, given through a rectal tube passed as high as possible.

Another excellent method of relieving the discomfort due to "wind" is to give a rectal wash out, using warm water into which 1 fluid oz. of aqua menthæ piperitæ has been mixed.

These measures may fail where the intestines are in a condition of temporary paralysis (often a result of sepsis). Eserin salicylate, gr. 1-100, given hypodermically four-hourly, may be ordered. Pituitary extract is sometimes tried. These drugs promote peristalsis.

There is a considerable difference of opinion amongst surgeons as to how soon the bowels should be relieved after abdominal operations, but as a general rule it is found that there are no ill effects to the parts involved in major operations if the bowels are opened within forty-eight hours of operation, and undoubtedly it adds to the comfort of the patient.

In plastic operations for repair of fistulæ, longer time may have to be allowed.

In simple appendectomy many surgeons recommend the administration of a simple enema at the end of twenty-four hours, and a suitable purgative on the second evening. In minor operations not involving the alimentary tract, it is usually advisable to give aperient twenty-four hours afterwards—if there is much vomit-

ing an enema is better, as the aperient might not be retained.

Flatulence may be relieved by the passage of a rectal flatus tube; take gum elastic or rectal tube with opening at extremity instead of the side, soak in warm water and lubricate it for eight or ten inches; then pass gently and slowly up beyond the sigmoid flexure of colon—no force should be used in this proceeding. The external end of the tube should be placed in a bowl of water to observe if flatus is passed.

Flatulence is an important symptom of complications liable to occur after abdominal section.

In peritonitis and intestinal obstruction there is an arrest of the passage of flatus from rectum. Vomiting after operations may be caused by flatulence and distention, and not be due to post-anæsthetic effects.

Where it does not interfere with the operation area it is permissible to give frequent drinks of hot water,  $\mathfrak{z}$  vi, with sod. bicarb.  $\mathfrak{z}$  i, and aqua menth. pip.  $\mathfrak{z}$  i to iii. If retained it assists the cructations and neutralises acidity, and if vomiting is produced the patient thus washes out his own stomach. In some cases the surgeon may give a stomach wash out.

Drugs which have a slightly stimulant action and expel gas from the stomach and intestines are known as Carminatives. These include:—

(a) By mouth.—Peppermint, ginger, cinnamon, musk, camphor, capsicum, asafoetidæ, cajuput, anise, carraway, sodium bicarbonate.

(b) By rectum.—Turpentine, rue, asafoetidæ, peppermint.

Flatulence persisting in convalescence may be alleviated by giving hot water to sip one hour before food. Meals should be dry and compact, and there should be careful mastication and complete bowel action.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Henrietta T. Inglis, Miss Dorothy James, Miss P. Thompson, Miss M. Steevens.

Miss H. T. Inglis writes:—"Flatulence after operation most commonly arises in post-operative abdominal cases. The object must be to get, if possible, a natural action from the bowel as soon as permissible, unaccompanied by violent peristalsis. The best form of treatment to prevent this is use of enemata, which is the least irritating."

#### QUESTION FOR NEXT WEEK.

What is blood? What is its composition? What causes it to clot?

## NURSING ECHOES.

In reply to a number of inquiries, "When shall we be able to register?" we advise nurses to possess their souls in patience for a little longer, and get birth and marriage certificates in readiness. The General Nursing Council is losing no time—indeed, it is making excellent progress, but—as we have before stated—its work is enormous, and thoroughness must be its policy.

Do not forget that the Annual Meeting of the Society for the State Registration of Trained Nurses is to be held at 431, Oxford Street, W., on Friday this week at 4.30 p.m.

The Annual "Camp" of the Nurses' Missionary League is to be held this year at Sandsend, on the Yorkshire coast, from June 12th to 26th. The "Camp" will not be under canvas, but will be accommodated in a large house a few minutes from the sea. The surrounding country is well wooded, and there will be opportunities for bathing, picnics and excursions. It is expected that some missionary nurses home on furlough will be present, and some of the meetings (which are always short and confined to the mornings and evenings) will be devoted to hearing about their experiences. The cost will be £1 13s. or £2 2s. a week (according to room occupied), and any nurse who has her holidays due at these dates should write for further particulars to Miss Macfee, 21, Frögnal Lane, Hampstead, London, N.W. 3.

The reports presented at the annual meeting of the Devon Nursing Association at Exeter showed that although thirteen new branch associations had affiliated during the year, bringing the total to 128, and that there had been no lapses, the work was greatly handicapped by a scarcity of village nurses. Ten nurses completed their training, and are at work in the county; but twenty-one left for various reasons—nine to be married. Eleven pupils are in training.

The hopes that V.A.D. women, relieved of war duties, would take up village nursing were not realised. Women who were keen to become nurses were more inclined to take hospital training for three years, and were then unwilling, as a rule, to settle in country districts. This scarcity of nurses made the task of Miss Bell, the Superintendent, exceedingly difficult and anxious. Thanks to the liberal assistance of the County Council, the committee reported a substantial improvement in the nurses' salaries. Every

nurse now receives a minimum of £90, rising to £120, with an allowance for uniform. The County Council was also willing to give twenty scholarships of £50 each. For lack of suitable candidates the scheme for the training of home helps was not brought into working order. The Local Government Board increased their midwifery grant to £655. The British Red Cross Society had made a grant of £3,000, which was invested. In spite of these grants the income was not sufficient to meet the increasing claims made upon the Association. There was a debit balance of £120 13s. 7d.

Lady Fortescue, President of the Association, said there was an almost despairing lack of candidates for training, and the finances were another cause of great anxiety, due mainly to the abnormal cost of everything.

It is most hopeful to learn that "women who are keen to become nurses" are at last realising that it takes three years' hospital training to fit them for their responsible duties. Let us hope the women who run County Nursing Associations will soon realise this fundamental truth. Also, why have motors never been at the disposal of the district nurse? With a "run about" no end of work could be got through—with the least possible fatigue and wear and tear of boots!

At a meeting held recently at the General Hospital, Birmingham, under the presidency of Miss Musson, Mrs. H. S. Richards briefly outlined her scheme to raise money for the establishment of a nurses' club in Birmingham. It has been decided to hold a large scenic fair at Bingley Hall in the spring of 1921, and it is hoped the movement will have the sympathy and support of three counties.

We hope, as the public are to find the funds, that the club will be open to all trained nurses, and that they will not compulsorily be members of the College of Nursing, Ltd. Birmingham nurses should have this point cleared up before they get their friends to support Mrs. H. S. Richards' appeal.

Sir A. Beattie, D.L., trustee, presided at the annual meeting of the King Edward Coronation Fund for Nurses, Dublin, when the fifteen members of the Council were re-elected for 1920-21. The annual report, read by Miss Boland, showed that during the year eighteen nurses in distress through sickness, accident, old age, or other cause, had been assisted by grants amounting to £119, besides the Countess of Pembroke annuity, which brought £12 7s.

to the holder. The balance to credit was £35. On the motion of the chairman, an alteration was made in Rule 31, substituting "two referees" for "two life governors," on the recommendation of applicants for assistance. At a council meeting held subsequently, Miss Boland and Miss M'Donnell were re-appointed hon. secretaries; Sir W. Fry and Miss Boland, hon. treasurers; and Mr. W. H. Baskin, hon. auditor. Grants were made to urgent cases.

Miss Clarke, a nurse and certified midwife, is standing as a Labour candidate for the Board of Guardians of the Poor of Dublin Union, and has issued an excellent address, in which she emphasises the necessity for Children's and Mothers' Pensions, Health, and Efficiency and Economy.

The benefit to a profession of a strong Association which will watch and protect its interests is exemplified in the Supplementary Report of the Council of the British Medical Association, in the *British Medical Journal* of May 29th.

The Council reports under the heading "Establishments for Massage and Special Treatment" that "the L.C.C. (General Powers Bill) has been considered by the Council, and representations made to the L.C.C. that Clause 17 (old Clause 24) of this Bill should be modified, so as to remove therefrom certain objectionable features as to the certification of medical practitioners who desire to set up establishments for massage, &c., thereby to some extent duplicating the powers already exercised by the General Medical Council. The attention of the Committee of Medical Members of Parliament and the General Medical Council was also directed to this matter."

The result of this action was that "the L.C.C. agreed to amend the Clause so as to remove its most objectionable features, and the Association has accordingly withdrawn its opposition. The old Clause demanded that any practitioner desiring to carry on an establishment for massage or special treatment should obtain a certificate signed by two practitioners to the effect that the establishment would not be carried on for immoral purposes, and that he was qualified to carry on an establishment for massage.

Under the amended Clause, all he will have to get is a certificate signed by two practitioners saying that he is a suitable person to carry on such an establishment."

Now that trained nurses have legal status, their organisations will be able to wield much greater influence in professional affairs.

## THE GUY'S HOSPITAL NURSES LEAGUE.

### THE ANNUAL DINNER AND MEETING.

The Annual Dinner and Meeting of the Guy's Hospital past and present Nurses' League was held on Friday, May 28th, in the Nurses' Home, the members and their guests receiving a cordial and charming welcome from Miss Margaret Hogg, C.B.E., R.R.C., Matron of the Hospital and Hon. Secretary of the League.

Every place was filled in the beautiful dining room, where the sun glinted through the great bow window on to the golden buttercups, and blue cornflowers (the Guy's colours) which were employed with delightful effect in the decoration scheme of the tables. It was rumoured, indeed, that a good many late applications for tickets had had to be refused, for lack of room, and certainly the attendance was a record one.

We always admire the celerity and deftness with which the domestic staff wait on these occasions, and this year they added to their laurels by quickly removing some of the tables to the "Park," where coffee (as hot as coffee always should be) was served in the grateful coolness of a perfect evening, and we noted the walls of the new block of the Nurses' Home well on towards completion, so that 42 more nurses can be accommodated, and the hours of the present staff consequently shortened.

Then a move was made to the dining room, of noble proportions and rich and satisfying colouring, where, awaiting the opening of the business meeting we were entertained by some of the members of the nursing staff, who, in their present strenuous life, have kept up their accomplishments of playing and singing delightfully. Incidentally we wondered whether any nurses would be ill-advised enough to desire to "live out," with the inevitable discomforts attendant on the daily journey backwards and forwards in bad weather, and, for the most part living on modest incomes, which usually means cramped quarters and indifferent cooking, instead of enjoying a life of comradeship, in spacious quarters planned for their convenience and comfort.

### THE BUSINESS MEETING.

The meeting was opened by Miss Hogg, who said what a real pleasure it was to welcome those present. Only a short time ago they were remembering daily in the hospital those engaged in war work; now they were assembled there, representative of nursing in all parts of the world. It was a real Peace Celebration.

To-day, nurses were faced by serious problems. Substantial progress had been made, and we had got State Registration of Nurses, and the General Nursing Council had been established, but there was need for greater unity in the nursing profession.

In the hospital, the nurses' salaries had been increased, and their hours decreased. When the new wing was completed, it was hoped to institute

a working week of 56 hours. Increased massage accommodation had been added, a new shampoo room, and a room in which nurses could do as they pleased, with facilities for washing and ironing blouses, and other small oddments. The new Infant Welfare Centre had also been completed, and opened.

Miss Hogg then introduced, as chairman, Miss Constance Todd, R.R.C., M.M., whose magnificent work in the war was, she said, well known to those present.

#### REPORT OF THE YEAR'S WORK.

Miss Hogg, as Hon. Secretary, presented the report of the year's work, which shewed amongst other items that 346 week-ends, and days off, had been spent at the Cottage during the year, and over 1,000 short visits paid for tea, etc. Six hundred volumes had been taken from the Nurses' Library during the year. The Swimming Club held a most successful tournament in August.

The Photographic and Needlework Exhibitions, on view in adjacent rooms, had not received as much support as usual. In the case of the Photographic Exhibition, it was due in a great measure to the high prices of materials; and in regard to the Needlework Exhibition, to the stipulation that the work should be sent in unwashed.

The new edition of the *Nursing Guide* had been sent out to members.

The building and furnishing of the extension of the Nurses' Cottage was nearly completed; a new grass tennis court had been made and the garden freshly laid out. They owed this to the generous gift of £3,000 from Mr. Cosmo Bonsor and Lord Revelstoke, who gave this extension to commemorate the work done by Guy's nurses at home and abroad during the war.

Miss Hogg then enumerated the many honours which had been won by Guy's Nurses for War Service, and recorded with much regret the deaths of several members since the last meeting.

#### FINANCIAL STATEMENT.

In the absence of the Hon. Treasurer (Mrs. Cameron), Miss Hogg also presented the financial statement, which showed that the amount of income over expenditure was £125 10s. 1d.; and with the balance brought forward from the previous year, £264 13s. 4d. The cost of printing the new Register was, however, so heavy—nearly £400—that the whole of this balance was swallowed up, and there would be a deficit at the end of the year if they were not very careful. Part of the cost would, however, be defrayed by advertisements; and members had been so good in responding to her appeal for a small donation that it was hoped they would have very little deficit to show. The cost of the upkeep of the cottage would be very much increased, but the Governors had come to their help by giving a grant each year for the purpose.

Miss Hogg reported with much regret the resignation of Mrs. Cameron, and announced that Mrs. E. C. Hughes had consented to be nominated

for election as Hon. Treasurer at the next Council meeting. Miss Smith then announced the result of the ballot for the election of members of the Council for the ensuing year.

#### THE CHAIRMAN'S ADDRESS.

Miss Todd then gave a most interesting address, gracefully expressing the very great charm that there was in coming back to Guy's. She spoke of the work at the Brigade Hospital at Etaples and its vivid interest, and of the credit due to those who carried on in the hospitals at home. She also told a tale of a dour old Scotch prize fighter who had been badly wounded, and who seemed so discontented with everything to do with the war, that the question was put to him why he had volunteered, as he was over age? His reply was: "A man needs to be a bit of an 'ero now-a-days to stop at home." Miss Todd paid a high tribute to the British soldiers and said she had never realised before how wonderful our men were.

She told also of the Flight Commander of a German aeroplane, which bombed the hospitals at Etaples, who was brought down; and, as he was wounded, was brought into the hospital. He loudly demanded to be sent to England and not be left in a hospital which would assuredly be bombed again by his compatriots. She described also the events of Corpus Christi, 1918, when it seemed as if the Germans were absolutely determined to wipe out every hospital in Etaples.

The meeting closed with votes of thanks, after which the photographs and needlework were duly admired.

#### PRIZE WINNERS.

##### PHOTOGRAPHIC EXHIBITION.

The prize-winners in this section were as follows:—

CLASS A.—Photographs which are the entire work of Exhibitors who have won an award at a previous Exhibition. *First Prize*, Miss H. M. Edmonds. *Second Prize*, Miss M. Smith.

CLASS B.—Photographs which are the entire work of Exhibitors who have not won an award at an Exhibition. *First Prize*, Miss E. Macmanus. *Second Prize*, Miss F. Nicholls. *Third Prize*, Miss J. R. Wadlow.

CLASS C.—Photographs which have been taken by the Exhibitor, but not printed or developed by her. *First Prize*, Miss F. Edmonds. *Second Prize*, Miss F. Brooks. *Third Prize*, Miss L. G. Mannell.

##### NEEDLEWORK EXHIBITION.

CLASS A (1) Plain Needlework.—*First Prize*, no award. *Second Prize*, Miss L. Dixon and Miss K. I. Somerville (tie). (2) Darning.—Miss R. Dreyer.

CLASS B, Fancy Work (1) Embroidery.—*First Prize*, Miss E. Bond. *Second Prize*, Miss J. Lewin. *Highly commended*, Miss J. Hills, Miss E. New. (2) Drawn Thread Work.—*First Prize*, Miss R. Ford. *Second Prize*, Miss J. Hills. *Special Prize*, Miss J. Lewin, for a very beautifully worked tablecloth.

CLASS C.—*Highly commended*—Lace, Miss R. Dreyer. Crochet, Miss J. M. Richardson, Miss M. C. Allen, and Miss D. Lane. Knitting.—*First Prize*, Miss C. Barker. *Second Prize*, Mrs. Church. *Highly commended*, Miss V. Tebutt and Miss S. Weiss.

CLASS D, Miscellaneous.—*Prizes*, Church Embroidery and Worked Banner, Miss M. Yeaxlee.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION

## AN INTERESTING CEREMONY.

### PRESENTATION TO MISS MARGARET BREAY.

A specially interesting ceremony took place at the offices of the Royal British Nurses' Association on Saturday, May 29th, when Miss Margaret Breay was presented by some of her friends with a beautiful antique mirror and a pair of fine blue and white old Spode bottles. In addition Sister Carter, who was present, gave to Miss Breay a lovely sheaf of flowers—pale mauve irises, yellow snapdragons, roses, pink carnations and other exquisite blossoms—a feast of beauty.

The chair was taken by Miss Henrietta J. Hawkins, M.R.B.N.A., P.L.G., who said:—

In accepting this position which you have so kindly asked me to fill I do so with a sense of my own inadequacy to do justice to the subject. We are met to do honour, where honour is indeed due, to the guest of the afternoon, our dear friend Miss Breay, and to offer for her acceptance this gift, which friends who best know her tastes have selected. The gift, I venture to think, is singularly appropriate, apart from the niche for which I believe it is destined in Miss Breay's charming Surrey cottage. A mirror symbolises truth, and truth, as we know, has been the root principle of our friend's public and private life. It needs no words of mine to set forth Miss Breay's worth, it is apparent to all who know her. But, as Mr. Spurgeon once said, "Put flowers in your mother's bonnet and not on her grave," and as I rather admire that advice, I hope Miss Breay will forgive me if I pin a few flowers in her bonnet this afternoon from the posy of her many fine qualities. Her splendid natural ability, her well-informed mind, her infinite capacity for taking pains, her unselfish devotion, her boundless energy have been unstintingly poured into the building up of THE BRITISH JOURNAL OF NURSING of which we are so justly proud. On this solid foundation, so well and truly laid, has arisen slowly and painfully the Registration Act, the fruits of which will be enjoyed by generations of nurses long after we ourselves have passed away.

I lately heard Bishop Gore say in St. Paul's Cathedral that next to the salvation of his soul he prayed that God would allow him to leave behind

some work that would last. Miss Breay has the satisfaction of knowing that the immense sacrifice of her private life, of her ease, her time and her money, has not been in vain—her work will last. I feel confident that I am voicing the wish of all present when, in offering this mirror and the beautiful bottles for Miss Breay's acceptance I say that it is the expression of our unbounded admiration and affection for a talented and brave pioneer, a loyal colleague and an unselfish and generous friend.

MISS BREAY, in reply, said: Miss Hawkins and Ladies, it is impossible adequately to express my thanks to you for your kind words and most charming gifts. In the campaign in which we have been associated together each has had her own particular bit of work, and the making of speeches has never been mine—indeed, on one of the few occasions when I made an effort in that direction one of my relations—whose candid criticisms are so good for one—advised me to keep for the future to things I could do, and not attempt those I could not. (Laughter.)

So I will not attempt a speech, but just talk to my friends of whom there are so many in this room. First, of course, Mrs. Bedford Fenwick, who, as Matron of St. Bartholomew's Hospital, gave me my chance of becoming a probationer in that grand institution when the Matrons of other large London hospitals told me to come back in six years' time. From that day to this I have struggled after the "banner with a strange device" held aloft by our great leader.

There are present also members of the Matrons' Council (which did such splendid work and meant so much to those working for State Registration of Nurses) and of the Society for the State Registration of Trained Nurses, by which its spade work for the Bill was carried on. The National Union of Trained Nurses and the Fever Nurses' Association, represented here, have also been valuable allies, and, ultimately, all the Societies promoting the State Registration movement have been affiliated in the Central Committee, members of which are present this afternoon.

It is a peculiar joy to me that this presentation has been made in the rooms of the Royal British Nurses' Association. It was my first love, and I was present at the meeting at St. George's Hall in February, 1888, when it was publicly founded with high hopes.



I cannot find words to express the pleasure your kind gifts will give me. Some of those present know a cottage on a Surrey heath where there is a place for just such a mirror, but I never expected it to have one half so beautiful. I thank you all very much.

MRS. BEDFORD FENWICK said: I must add a word of appreciation of all that Miss Breay has done for the benefit of the nursing profession throughout her professional career. I very much doubt if without her devoted work for the organisation of nursing, the Nurses' Registration Act would ever have been passed in its present satisfactory form.

Miss Breay has not only given every moment of her time, depriving herself of all leisure for this cause, but has placed at our disposal her very unusual talents and fine characteristics. In spite of all this self-sacrifice I am not going to condole with Miss Breay, but to heartily congratulate her, because nothing is more satisfactory than to be permitted to have fine work allotted to one in life, and to have the spirit and health to perform one's duty to the best of one's ability.

Miss Breay's life has been spent, inspired by the highest ideals, in the service not only of the Nursing Profession, but of humanity and the Empire. Her opportunities have been great, and she has availed herself of them for the benefit not only of her colleagues, but of generations of nurses to come.

At the conclusion of this interesting ceremony those present adjourned, by invitation, to another room, where tea, characteristically Scotch in its generous proportions, had been provided, after the pleasant and friendly fashion which prevails so often in connection with R.B.N.A. gatherings. Those present much enjoyed the opportunity of social intercourse, for, in their busy lives, unless such occasions were planned for them they would seldom meet, and there is nothing more delightful than to discuss, informally, matters of common interest with those inspired by the same hopes and aspirations as ourselves. It was a happy ending to a most enjoyable afternoon.

#### CIVIC DUTIES AND RESPONSIBILITIES.

We regret that we have not space in this issue to report Councillor Beatrice Kent's admirable lecture on "Civic Duties and Responsibilities," which she delivered at the offices of the R.B.N.A. on Saturday afternoon. We hope to do justice to it in a subsequent issue.

#### ENGAGEMENT.

We have just received notice of the engagement of Miss Florence Relph, M.R.B.N.A., to Mr. S. V. Edge, Solicitor, Ootacamund, India. We desire to convey to both our congratulations and good wishes for their happiness.

#### MARRIAGE.

As we go to press we have had an intimation of the marriage of Miss E. T. de Fraine, M.R.B.N.A., to Mr. J. Pain. Through the medium of the

Journal we offer Mrs. Pain and her husband the good wishes of her fellow Members.

#### OBITUARY.

It is with very deep regret that we have to report the death of Miss Rosamund Fowler, a Member of the General Council and one who was held in great esteem by her fellow Members. Miss Fowler was a Diplômée of the Corporation.

#### NOTICES OF MEETINGS.

Members are asked to note the following fixtures:—

#### THE PROCEDURE OF CONDUCTING BUSINESS MEETINGS.

On Saturday, June 5th, Mrs. Bedford Fenwick will give a "Grind" on "The Procedure of Conducting Business Meetings," 10 Orchard Street, W. 3 p.m.

#### THE MUNICIPAL ORGANISATION OF HOME NURSING.

On Saturday, June 19th, Miss H. G. Klaassen will speak on "The Need for Nurses Engaged in Private Visiting Practice, and in District Nursing, to consider the Municipal Organization of Home Nursing," 10, Orchard Street, W. 3 p.m.

#### ANNUAL MEETING.

On Monday, June 21st, the Annual Meeting of the Royal British Nurses' Association will be held. The Executive Committee trust that there will be a large attendance of members. 11 Chandos Street, Cavendish Square. 3 p.m.

#### NOTICES TO MEMBERS.

We shall be very grateful if, in consideration of the greatly increased rates of postage, Members requiring answers to their communications will enclose a stamp for reply. The amount of additional expense thereby incurred by the individual will be very small, but if all nurses attended to this item it would save the various Funds of the Association a heavy expenditure for postage. At present, comparatively few nurses think of enclosing postage for a reply, though some are most careful to do so even when they merely intend it to cover a receipt. It is to be remembered that, in spite of ever-increasing expenditure, entrance fees and annual subscriptions have never been increased and, in consideration of this, we hope that our nurses will give due attention to the point above raised.

Members are also reminded of the necessity for forwarding at once to the Office notice of any change in their addresses, as failure to do so always involves considerable correspondence which could be avoided if they would just send a postcard at once.

ISABEL MACDONALD,

Secretary to the Corporation.

10, Orchard Street, W.1.

## POOR LAW INFIRMARY MATRONS' ASSOCIATION.

The Poor Law Infirmary Matrons' Association are holding a meeting on June 19th at the Eustace Miles Restaurant at 5.30 p.m. One of the subjects for discussion is how to increase the usefulness and influence of the Association. In the past much expert help has been forthcoming, through the members, of value to the Local Government Board on nursing matters, and now that the Ministry of Health is established the Matrons and nurses in the Poor Law Service can, we feel sure, continue, if consulted, to give most valuable assistance in the evolution of national nursing, and also, through Miss Dowbiggin, to the General Nursing Council, when the standards for Nurses' Registration, after the term of grace, must be defined for the General (Women Nurses) Register.

## QUEEN'S NURSES.

A well-attended meeting of the Metropolitan and Southern Counties Association of Queen's Superintendents was held at 43, Blandford Square, on Thursday May 27th, by kind permission of the Paddington and Marylebone District Nursing Association. Such important questions as the shortage of District Nurses, salaries, examination, &c., were discussed, and it was decided to send several resolutions with regard to these matters to the Council of the Q.V.J. Institute.

Miss Wagg kindly took the chair at the meeting, and Miss Hughes, Miss Peterkin, Miss Bridges and Miss Lowe met the members of the Conference at tea afterwards.

## THE SCOTTISH REGISTRAR.

### AN INITIAL BLUNDER.

We hear a feeling of apprehension has been aroused in nursing circles in Scotland, that the well-paid post of Registrar to the General Nursing Council for Scotland has not been advertised in the Nursing Press, and that it does not require that the candidates shall possess a nursing certificate, or have any knowledge of professional affairs. We do not wonder that Scottish nurses resent this attitude towards their highly-skilled work by those who have drafted the advertisement, and are glad to note from letters received from over the Border that they approve the policy in this connection of the G.N.C. for England and Wales. Let us hope that it is not too late for the Scottish Council to realise its duty to our Scottish colleagues. In this case, apparently, she who pays the piper does not call the tune! We look to the Matrons and Nurses on the Council to acquaint the lay and medical element upon it with the feelings and wishes of the nurses. This way only can harmony be maintained.

## THE PROFESSIONAL UNION OF TRAINED NURSES.

By MISS MAUDE MACCALLUM.

It is time that Private Nurses looked, not so much to their laurels, as to their livelihood, or they will wake up some day and find their work taken from them.

There was great indignation at first over the untrained woman coming into the field of action, but they have become so used to the idea, that their wrath is now only simmering, if it has not already evaporated.

What do they think of the fresh aspirant brought forward by the newly-elected President of the Fever Nurses' Association? He suggests "a Nursing Institute" be started. "Nurses would be available either for full time in any one house in the way in which a private nurse is now employed by those who are fairly well to do, and also for such work as is now termed 'district nursing.'" He did not consider such a scheme would necessarily interfere with the nurses of private institutes, because the provision of full-time nurses for illness for less well-to-do households would necessitate the paying of a smaller fee than a nurse working privately could afford to take. This smaller fee might be made possible by subsidising the Institute.

Is this Institute to be subsidised by public money, to undercut the private nurse who is doing visiting work?

It must also be of much interest to the Public Health Nurse to learn that "already public health authorities are increasing their demands for the services of nurses in connection with school medical work, tuberculosis, maternity and child welfare, lying-in hospitals, convalescent homes, and many other special departments of nursing activity. The speaker was of opinion that experience in fever hospitals produced a type of professional woman specially qualified to deal with children, to treat those diseases which are incidental to the years of childhood."

Wake up, Private Nurse! A Private Nurses' Section is being formed by the Professional Union of Trained Nurses to safeguard your interests. Join the Union, and *do it now!*

## THE RECOGNITION OF NURSING.

Lieut.-Colonel N. Howard Mummery, the General Secretary of the Federation of Medical and Allied Societies, informs us that the following letter has been sent by his society, to the Right Hon. C. Addison, M.D., M.P., Minister of Health:—

SIR,—My Executive Council has had under its consideration the fact that nurses, midwives, women sanitary inspectors and health visitors and masseuses are not directly represented on the Consultative Council of Medical and Allied Services of the Ministry of Health. The organisations representative of these services are represented in this Federation and as a result of a

recent conference it has been ascertained that these bodies would consider their requirements met if there were on the Consultative Council of Medical and Allied Services a qualified nurse who is also a qualified midwife, and who at the same time should represent the massens and sanitary inspectors.

Whilst aware that you have recently stated in the House of Commons that the Consultative Council in question is limited to twenty members, my Executive Council feels sure that when the importance of the matter is brought to your notice you will find means of overcoming this difficulty.

Whilst thanking the Federation sincerely for its kind interest in the question of the representation of nursing and other allied services on the Consultative Council of Medical and Allied Services of the Ministry of Health, we cannot agree that the requirements of all these branches of women's health work will be "met" by placing on the Consultative Council one woman to represent them all.

Trained Nursing having now attained professional status by Act of Parliament, has a right to representation on the Consultative Council "off its own bat," as we may say, without making it compulsory that without a midwifery qualification a registered nurse is ineligible. One might as well claim that the representative medical practitioners on the Council must also hold diplomas as dentists and chemists. No such principle is enforced; dentists and chemists have representation on the Council as such, and we claim the same privilege for registered nurses and certified midwives.

The claims and requirements of services allied to medicine might be "met" by three seats on the Consultative Council, but not by less.

As it is, in the interim report of this Consultative Council, "nursing" is apparently "to be supplied" along with the lint and the bandages!

### THE HOSPITAL WORLD.

The Liverpool hospitals for Children are wise to amalgamate. At the 21st Annual Meeting of the Governors of the Royal Liverpool Country Hospital (which we regret to note has an over-draft at the bank of £8,797) it was explained that the meeting was purely an informal one, and that when arrangements for amalgamation with the Liverpool Children's Infirmary were completed, which, it was hoped, would be very soon, a general meeting of the Governors of both institutions would be held under the chairmanship of the Lord Mayor, when the new institution, under the title of the Royal Liverpool Children's Hospital, would be launched.

The Royal Southern Hospital, Liverpool, in its determination to do justice to the undeniable claims of its nursing staff for better conditions finds itself faced with a problem which involves a considerable capital outlay. The establishment of a higher scale of remuneration—although that will add largely to the expenses of the institution—is a comparatively simple matter, but the lessening of the hours of duty, which is an equally necessary

reform, raises a notable difficulty. To maintain the efficiency of the hospital's work it is plain that the working hours cannot be reduced without the employment of additional nurses.

As the accommodation of the existing nursing staff is already taxed to the utmost further accommodation will have to be provided. The committee of the hospital is therefore appealing for funds to extend the Nurses' Home. A contract for the building of this extension has been made which, together with the furnishing and other extensions which will have to be undertaken at an early date, will cost about £12,000. The sum of £8,500 has already been received, but a balance of £3,500 remains to be raised. Donations should be addressed to Mr. Lyon H. Maxwell, the hon. treasurer, at the Royal Southern Hospital.

### A PROGRESSIVE MOVEMENT.

Sir Arthur Stanley, Chairman of the Joint War Committee, referring to the recommendations of the Consultative Council of the Ministry of Health, which will entail a considerable increase in the work of transport of the sick and injured in this country, and the special attention directed to the necessity for an Ambulance Service, states that the Joint Council of the British Red Cross Society and the Order of St. John has been able to anticipate this demand and has, during the last twelve months established over 300 motor ambulance stations throughout the country. Although a large proportion of the ambulances have been in service for only a few months, they have already been the means of transporting over 12,000 cases.

### HONOURS FOR NURSES.

The King held an Investiture in the Quadrangle of Buckingham Palace, on the morning of May 27th, when His Majesty conferred the following decorations:

#### BAR TO THE ROYAL RED CROSS.

Miss Rachael Cox-Davies, Territorial Force Nursing Service.

#### THE ROYAL RED CROSS (FIRST CLASS).

Vera, Mrs. Scholtz, Queen Alexandra's Imperial Military Nursing Service; and Miss Esther Isaac, Queen Alexandra's Imperial Military Nursing Service Reserve.

#### THE ROYAL RED CROSS (SECOND CLASS).

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Jessie Cairns, Miss Isabella Craig, Miss Florence Leman, Miss Elizabeth Mellor, and Miss Mildred Street.

Territorial Force Nursing Service.—Miss Christina Carnegie, Miss Elsie Chiplin; Emily, Mrs. Harward-Davis; and Miss Helen Smith.

British Red Cross Society.—Miss Emily Edwards, Miss Colette Parker, and Miss Margaret Riddell.

Civil and War Hospitals.—Miss Mary Cochrane and Geraldine, Mrs. Gould.

Civil Hospital Reserve.—Miss Florence Broome (also received the Military Medal).

Voluntary Aid Detachment.—Miss Beatrice Murgatroyd and Miss Isabel Patton.

Queen Alexandra received at Marlborough House the members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross and the Military Medal, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service), was also received by Her Majesty.

## THE FLORENCE NIGHTINGALE MEDAL.

The first awards of the Florence Nightingale Medal have now been made by the International Red Cross Committee at Geneva.

The medal was instituted by the International Committee in 1912 in memory of the work of Miss Florence Nightingale, to be distributed annually to six trained nurses who, in the opinion of the Committee, have rendered exceptional service in connection with nursing. During the war no distribution was made, but shortly after the signing of peace it was decided to award fifty of these medals, and all National Red Cross Societies were requested to submit recommendations for consideration by the Committee. Forty-two medals have been awarded to the following:—

### GREAT BRITAIN.

Mrs. John Lambert, of the Royal Naval Nursing Reserve, for services in 1915 and 1916, especially on the hospital ship *Rewa* at Gallipoli.

Miss Beatrice Isabel Jones, R.R.C., C.B.E., matron, Q.A.I.M.N.S., for services in Mesopotamia since 1916.

Miss Gladys Laura White (Sister), B.R.C.S., for service, 1915 to 1918, especially at No. 9 B.R.C.S. Hospital at St. Omer (No. 56 Casualty Clearing Station).

Miss Kate Maxey, R.R.C., M.M., (sister), T.F. Nursing Service, for services from 1914 to 1918, especially at No. 58 Casualty Clearing Station.

Miss Gertrude Mary Wilton Smith, Q.A.I.M.N.S., for services as sister-in-charge of Anglo-French hospital train No. 7 and No. 3 Casualty Clearing Station, France.

Miss Margaret Clotilde Macdonald, R.R.C., Matron-in-chief of the Canadian Army Nursing Service.

Miss Lucy Minchin, nursing sister of the British Army in India and Mesopotamia.

Miss Hester Maclean, R.R.C., matron-in-chief, New Zealand Army Nursing Service.

Mrs. E. R. Creagh, O.B.E., R.R.C., matron-in-chief, South African Military Nursing Service.

### AUSTRIA.

Mlle. Martha Paula Heller, Red Cross Hospital sister at Vienna; employed on the Russian and Italian fronts and in Albania.

Mlle. Maria Adamczyk (Sister Thekla), Red Cross sister at Vienna; formerly served in the Balkan War, afterwards head of the Red Cross Hospital at Lemburg.

### BELGIUM.

Miss Astley Campbell, an English nurse, matron of the Ocean Ambulance at Brussels.

Mlle. Kate Schandeleer, of the Edith Cavell School.

### DENMARK.

Mlle. Magdalene Tidemane, worked with the Danish Ambulances in France and with the American Red Cross at Belgrade.

### UNITED STATES.

Miss Helen Scott Hay, of the North Western Academy, Illinois.

Miss Florence Merriam Johnson, trained at the New York Hospital Training School; a director of the nursing department of the Atlantic Division.

Miss Martha M. Russell, trained at the New York Hospital Training School; also with the Atlantic Division Department; and matron of the University Hospital, Boulder, Colorado.

Miss Linda K. Meirs, trained at Philadelphia Hospital; served in Germany in 1914, France 1915, Rumania and elsewhere; matron of the Naval Hospital at Boston.

Miss Alma E. Forster, trained at the Presbyterian Hospital, Chicago; served in Russia 1914, the American Red Cross in Rumania in 1917, and Russia 1918.

Miss Mary E. Gladwin, trained at the Boston City Hospital; served at Nisch in 1914, and 1917 to 1919.

### FRANCE.

Mme. Marie Panas (*née* Valli), of the Société de Secours aux Blessés Militaires.

Mme. *veuve* Germaine le Grix (*née* St. Girons), Association des Dames Françaises.

Mme. Louise Hugues (*née* Leclerc), Union des Femmes de France, President of the Comité de St. Quentin.

Mlle. Christine de Chevron de Vilette, Société de Secours aux Blessés Militaires.

Mme. la Marquise de Clapiers (*née* de Foresta), Société Secours aux Blessés Militaires, President of the Comité de Marseilles.

Mlle. Marguerite Voisin, Société de Secours aux Blessés Militaires.

Mlle. Renee Aline Flourens, Union des Femmes de France.

Mlle. Marie Elisabeth Lajusan, Association des Dames Françaises.

### GREECE.

Mlle. Helene Vassiloboulo.

### HUNGARY.

Baronne Eizella Apor, Mlle. Ilona Durgo.

### ITALY.

H.R.H. Elena di Francia, Duchessa D'Aosta, Mlle. Ina Battistella, Mlle. Maria Concetta, Chudzinska, Mlle. Maria Andina, Mlle. Maria Antonietta Clerigi.

### JAPAN.

Mme. Take Hagiwara, Mme. Ya-o Yomamoto, Mme. Ume Yu-asa.

### RUMANIA.

Mlle. Elenore Mihailescu.

### CZECHO-SLOVAKIA.

Mlle. Irene Metekickova, Mlle. Sylva Macharova. Switzerland, not being among the belligerent nations, preferred not to put forward any names.

## HOW ABOUT IT?

Wereceived so many interesting and useful letters in reply to our enquiry if Private Nurses wished to be included in the Hours of Employment Bill, we should like to hear their views on the "Living Out" question; that is, the for and against a system of Sisters, Staff Nurses and Probationers living outside the gates of the hospitals to which they are attached.

## APPOINTMENTS.

## MATRON.

**Cottage Hospital, Maidenhead.**—Miss Mabel Ensor has been appointed Matron. She was trained in the Nightingale School of St. Thomas' Hospital, where she has also held the position of Sister, and of Sister-in-Charge of an Officers' Ward at No. 5 London General Hospital, T.F.N.S. She has seen foreign service as Matron in charge of a Unit in East Africa, and been mentioned in despatches and been awarded the Royal Red Cross (First Class).

## ASSISTANT MATRON.

**Kingston Union Infirmary, Kingston-on-Thames.**—Miss Esther Julia Hewes has been appointed Assistant Matron. She was trained at St. Thomas' Hospital, S.E., and at the Simpson Memorial Royal Maternity Hospital, Edinburgh, in Maternity Nursing; and is a certified midwife. She has done welfare work in the factory of Messrs. Chivers & Sons, at Histon; and has been Theatre Sister at the Dreadnought Hospital, Greenwich.

## SISTER.

**Lowestoft and North Suffolk Hospital, Lowestoft.**—Miss E. Raven has been appointed Theatre and Ward Sister. She was trained at the Royal Hospital, Sheffield, and held the position of Sister in the same institution. She has served overseas as a member of Queen Alexandra's Imperial Military Nursing Service Reserve, and been Sister at a Surgical Home in Ipswich, and at the General Hospital, Birmingham. Miss C. Alhurn has also been appointed Sister. She was trained at King's College Hospital, London, and has held the positions of Night Sister and Sister at the Evelina Hospital for Sick Children, London, S.E.

## NIGHT SISTER.

**Lowestoft and North Suffolk Hospital, Lowestoft.**—Miss I. M. E. Parkerson has been appointed Night Sister. She was trained at the Royal Infirmary, Halifax, and has served overseas as a member of the Territorial Force Nursing Service.

## NIGHT SUPERINTENDENT NURSE.

**Hackney Union Infirmary, Homerton, E. 9.**—Miss Edith Janetta Anderson has been appointed Night Superintendent Nurse. She was trained at the Bagthorpe Infirmary, Nottingham, where she subsequently held the position of Ward Sister; and since 1918 has been Health Visitor and Inspector of Midwives under the Medical Officer of Health, St. Helen's. She is a certified midwife.

## HEALTH VISITOR.

**Borough of Plymouth.**—Miss Madeline Murray has been appointed Health Visitor. She has held a similar position under the City of Westminster at Norwood, and been School Nurse at Exeter.

A meeting to be addressed by members of the Royal British Nurses' Association, and the College of Nursing, Ltd., respectively will be held in the Board Room, at the London Temperance Hospital, at 9 p.m. on Saturday, June 5th.

All members of the nursing profession and any ladies or gentlemen interested are cordially invited to be present.

The hospital is situated in the Hampstead Road, 5 minutes' walk from the Warren Street Tube, or Euston Square, on the Underground.

Buses from Charing Cross and Victoria pass the door.

## OUTSIDE THE GATES.

## MEDALS FOR MOTHERS IN FRANCE.

A decree establishes, under the name of the *Medaille de la Famille Française*, a distinction to be paid to the mothers of French families who have reared a number of children and thus become entitled to recognition by the nation.

The medal will be issued in three classes. The first is in bronze, for mothers of five living legitimate children, the youngest to be at least a year old. For eight children the medal will be silver, and for 10 in silver-gilt, bearing the name of the Gold Medal. The Minister of Public Health has signed a decree conferring the medal. Holders are authorised to wear the medal or medal-ribbon on all occasions.

## VERSE.

## TIME AND TIDE.

BY ISABEL ECCLESTONE MACKAY.

To the long sand and shining bay,  
To the far headland, lone and grey,  
By beach and creek and long-worn track  
The eager tides come flooding back—  
Only the tide of man's endeavour  
Slips to the sea, returning never.

What swinging star its course directs,  
What Might its certain way protects,  
Or if it rests by some dim shore  
Man knows not, only, evermore  
He hears the whisper of its going  
Call in the silence—outward flowing!  
—*Western Woman's Weekly*.

## COMING EVENTS.

**June 4th.**—Society for State Registration of Trained Nurses. Annual Meeting. 431, Oxford Street, London, W. 4.30 p.m.

**June 5th.**—Royal British Nurses' Association. "Grind" on "The Procedure of Conducting Business Meetings." Mrs. Bedford Fenwick. 3 p.m.

**June 17th.**—Central Midwives' Board. Monthly meeting.

**June 19th.**—Poor Law Infirmary Matrons' Association. Eustace Miles Restaurant. 5.30 p.m.

**June 19th.**—Royal British Nurses' Association. Address on "The Need for Nurses Engaged in Private Visiting Practice, and in District Nursing, to consider the Municipal Organization of Home Nursing," followed by discussion. Speaker, Miss H. G. Klaassen. 10 Orchard Street, Portman Square, W.1. 3 p.m.

**June 21st.**—Royal British Nurses' Association. Annual Meeting. 11, Chandos Street, Cavendish Square. 3 p.m.

**June 21st-25th.**—General Lying-in Hospital, Yerk Road, Lambeth, S.E.1. Post Graduate Week for Midwives.

**June 22nd to 25th.**—Tenth Annual Nursing and Midwifery Exhibition and Conference. Royal Horticultural Hall, Westminster. Noon to 9 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

**PROFESSIONAL UNION OF TRAINED NURSES, GLASGOW.**  
**SCOTTISH NURSES WISH FOR TRAINED NURSE AS REGISTRAR.**

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—I am instructed by my committee to forward the enclosed copy of a resolution which they sent to the General Nursing Council on May 31st, 1920.

Yours faithfully,

C. H. MCARA, *Hon. Sec.*

"Scottish Members deplore the action of the General Nursing Council (Scotland) in offering the post of Registrar to other than a trained nurse. They strongly recommend that the appointment be limited to a trained nurse with administrative ability, and conversant with the standards of nursing education. Further, they recommend that the appointment be advertised in the Nursing Press as well as the daily Press and the Medical Press."

37, Stobcross Street,  
 Anderston, N.B.

**RECIPROCAL REGISTRATION WITH AUSTRALIA.**

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—You must get tired of all the thanks and congratulations that have been showered on you, but you must feel confident that you have the admiration and gratitude of the nursing world.

I am anxious to become a "registered nurse" in England as soon as possible. Could you please let me know, perhaps through the medium of the journal, how to go about accomplishing this? The information will then be useful to others.

I am a life member of the R.B.N.A., also the A.T.N.A. Will that be any help?

I regret to trouble you and perhaps had I read THE BRITISH JOURNAL OF NURSING intelligently it would not be necessary to make these inquiries. There may be others though as stupid as I.

With many thanks,

I remain, yours truly,

MARY K. COLEMAN.

No. 8, Australian General Hospital,  
 Fremantle, West Australia.

[We have already received several letters from Nurses in Dominions Beyond the Seas, making enquiries on "How to register." This pleases us greatly, proving that we must have reciprocal registration with the nurses in such Dominions as soon as possible to knit up British nurses throughout the world.

In New Zealand, in the Canadian Provinces and in States of United South Africa, systems of State

Registration are in force; but we deeply regret that throughout the Commonwealth of Australia, with the exception of the State of Queensland, registration is carried out through voluntary, not State, organisation, so that until Nurses trained in Australia are registered by Act of Parliament in the Commonwealth, they are not eligible to register in England.

Here we have a forcible lesson of the value of co-ordination by State control.

Our Act provides:—

Section 6 (1) Any person who proves to the satisfaction of the Council that he has been registered either generally as a nurse for the sick, or as a nurse of some special class in any part of His Majesty's Dominions outside the United Kingdom, being a part of those dominions to which this section applies, shall be entitled, on making application in the prescribed manner, and paying such fee, not being greater than the fee payable on ordinary applications for registration under this Act, as the Council may demand, to be registered in a corresponding manner under this Act.

(2) This section applies to any of His Majesty's Dominions as respects which the Council are satisfied:—

(a) That there is in force therein an enactment, or a provision of any kind having the force of law; providing for the registration of nurses under some public authority.

(b) That persons registered under this Act are admitted to the register established under the said enactment or provision on terms not less favourable than those contained in sub-section (1) of this section; and

(c) That the standard of training and examination required for admission to the register of nurses established under the said enactment or provision is not lower than the standard of training and examination required under this Act.

We advise Australian Nurses to insist upon their Registration Bills receiving attention from their Legislatures. They have been turned down for several sessions—and as nurses have the vote, they must rise up and use it.—Ed.]

**PREVENTION OF VENEREAL DISEASE.**

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—May I suggest to the Society for the Prevention of Venereal Disease, and particularly to the Portsmouth Health and Housing Committee, that in impressing upon the men of the borough "their duty to the community in this matter," they should not lose their golden opportunity to eradicate the evil by also impressing on the men that physical disinfection is merely tinkering with the horror, unless it be accompanied by mental and moral disinfection.

Doubtless the National Council of Public Morals would provide a convincing leaflet on this point.

I am, Madam,

Yours faithfully,

MENA M. G. BIELBY.

Cranford, Middlesex.



## KERNELS FROM CORRESPONDENCE. NURSE REGISTRAR APPROVED.

*Miss Martha Drew, Manchester.*—"Your readers will quite agree with your expression of opinion 'that during the preliminary stages of drafting the Rules, the General Nursing Council must have time for free discussion with as little publicity as possible'; but a straw shows which way the wind blows, and I was delighted to read the advertisement for a Registrar, as it will, I feel sure, strongly commend itself to the profession throughout the country, that this important official shall be 'one of us,' and highly qualified at that, and that our Council is evidently in touch with our wishes and is looking after our interests."

*Miss C. Matthew.*—"All very pleased in this hospital that our Registrar is to be a nurse—it will make all the difference in the atmosphere of the office."

*C.F.T., Dundee.*—"I hear of Scottish nurses applying for registrarship in England, though apparently we are still in the dark ages here as our Council is not advertising for a thoroughly trained woman. As we nurses have to pay the excellent salary of £400 a year, why is all that money to be given to a person who may not know one certificate from another? I very much approve the wording of the English advertisement."

[We hope you have sent this expression of opinion to your Council; we have had several private letters to the same effect.—Ed.]

## SHOULD WE BE TAXED TO BRING GERMAN CHILDREN TO ENGLAND?

*Health Missioner, Middlesex.*—"May I heartily support your attitude re our taxation (in order to bring German children to England). It were more creditable and patriotic if the daily Press to urge the needs of our own children than those of our debauched enemies."

"I was approached the other day by a local resident with a request for a contribution to the hospitality funds. She had collected a considerable sum from the cottagers! Having absorbed the discussion in the B.J.N., and being in addition hot with indignation at the inability of mothers to provide necessary nourishment for their children during an epidemic of measles, I spoke forcibly for ten minutes. I told my interviewer that every child in the country, under 10, should have a quart of milk a day; that the vast majority cannot have it at its present price, and will feel the results of the deprivation all their lives. 'Would milk make any difference to them?' was her astonishing question."

"A New Zealand illustrated newspaper I have offers a painful contrast between those beautiful, firm-legged, dairy-fed children, and our own. The collector departed with the remark, 'I suppose I have sympathy.'"

The whole thing is founded on false sentiment."

*Miss B. C. Stableforth, L.C.C. School Nurse.*—"I have not suffered bereavement through the

war and so am not competent to judge, but I find it difficult to believe that a true mother's grief could be harder to bear, because something is being done to save innocent children of other mothers from misery, starvation, and death."

[This is not the point, but that if necessary "something should be done" to help the children of alien enemies in their own countries, and not in England.—Ed.]

"*A Mother of the Dead.*"—"I witnessed the arrival of the 500 children of enemy aliens last week. Anything more banal could not have been imagined. They appeared in much more robust health than thousands of our own half-starved children (orphans of patriot fathers and overworked mothers). To hear these children (taught to be hypocrites by the pacifist and foolish old women who welcomed them) actually singing "God Save the King" made me more indignant than ever. I thank you very sincerely for permitting an expression of the truth in your unbribable journal."

(This correspondence must now cease. May we advise our readers to read the "Peak of the Load," by Mildred Aldrich, which rounds off her lovely "A Hilltop on the Marne," and "On the Edge of the War Zone." In it she sums up the situation with consummate accuracy and truth.—Ed.)

## SCIENTIFIC NURSING.

*Miss Rosa Green.*—"I have attended several conferences on health of recent years—never a word about scientific nursing—everything else under the sun! I hope our General Nursing Council will buzz along and teach the B.P. that you can't play 'Hamlet' without the Prince of Denmark!"

## WHY SHOULD THEY?

*V.A.D.*—"I note Rural Nursing Associations are deploring the fact that V.A.D.'s are not coming forward to nurse in villages, &c. Why should they? We willingly gave our services during the stress of the war; now we are either required at home or intend to qualify for a profession, and thus not be 'blacklegs,' as we have been accused of being in the past."

[A very wise decision.—Ed.]

## REPLIES TO CORRESPONDENTS.

*Miss Ysabel Pedrosa.*—"We should advise you to write to Miss S. Watkins, Matron, Anglo-American Hospital, Gezira, Cairo, who would be able to give you useful information as to training facilities in Egypt."

## OUR PRIZE COMPETITIONS. QUESTIONS.

*June 5th.*—What is blood? What is its composition? What causes it to clot?

*June 12th.*—Give instructions how to clean a Bathroom.

*June 19th.*—What do you know of hay fever, its causes and treatment?

# The Midwife.

## CENTRAL MIDWIVES' BOARD.

At the Examination held by the Central Midwives Board in London and the Provinces on May 4th, 816 candidates were examined and 660 passed the examiners. The percentage of failures was 19.1.

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

The Examination of the Board on May 3rd and 4th, held simultaneously in Edinburgh, Glasgow, and Dundee, has concluded with the following results:—

The following are the successful candidates:—

### EDINBURGH.

Miss Mary M. Bain, Miss Mary Baxter, Miss Helen D. Blair, Miss Lilian M. Brown, Miss Margaret F. Brown, Miss Mary L. Bruce, Mrs. Mary W. Buchan, Miss Annie Buchanan, Miss Mary R. Dempster, Miss Rose E. Fairweather, Miss Elizabeth Hutchinson, Miss Harriet Jones, Miss Wilhelmina M. Jones, Miss Annie B. J. Laidlaw, Miss Janet Littlejohn, Miss Margaret H. McGeorge, Miss Jessie MacKenzie, Miss Annie McLellan, Miss Elizabeth B. Milne, Miss Jane Morley, Miss Madeleine L. Norman, Miss Alice Palmer, Miss Lily Priestner, Miss Elizabeth N. Pringle, Miss Edith M. Riddell, Miss Isabella B. Scott, Miss Harriette D. Smith, Miss Anne V. Stewart, Miss Elizabeth D. Swinton, Miss Mary A. Tuffs, Miss Margaret J. Weir, Mrs. Elsie B. F. Whipp, Miss Agnes Wilson, Miss Katherine Wishart.

### GLASGOW.

Miss Jennie R. Barkhouse, Miss Jemima Baxter, Miss Jessie Baxter, Miss Elizabeth Buchan, Miss Mabel A. Burch, Miss Jeanie B. Christie, Miss Margaret H. Connell, Miss Elizabeth Corroan, Miss Margaret M. Craig, Miss Louisa C. R. Crawford, Mrs. Elizabeth Daly, Mrs. Rose A. Dillon, Miss Jane A. Dunbar, Miss Elise M. Egger, Miss Agnes M. Ellwood, Miss Agnes C. Finlayson, Miss Helen Green, Miss Betsy M. Hodge, Miss Hannah O. Hunter, Miss Henrietta T. Inglis, Mrs. Elizabeth Irvine, Miss Florence Irving, Miss Annie Kerr, Miss Nora Lanaghan, Miss Jeanie Lang, Mrs. Catherine McAnulty, Miss Margaret P. McClunie, Mrs. Helen McDonald, Miss Mary C. McDougall, Mrs. Isabella McCarrigle, Miss Margaret C. McGregor, Miss Grace McHaffie, Miss Jane McIntosh, Miss Katherine E. McIver,

Miss Nellie Mackenzie, Miss Henrietta MacLeod, Miss Catherine Macpherson, Miss Catherine E. Macpherson, Miss Margaret M. Mann, Miss Margaret Matheson, Miss Jean Miller, Miss Elizabeth F. Milne, Miss Christina A. Moffat, Miss Janet E. T. Montgomery, Miss Annie Moreland, Miss Isabella S. McD. Morrison, Miss Mary A. Nimmo, Miss Margaret Paton, Miss Margaret McE. Paton, Mrs. Annie Reid, Miss Anne J. Roy, Miss Susan Sime, Miss Annie F. Sinclair, Miss Ethel Smith, Miss Helen McPherson Smith, Miss Kate Smith, Miss Mary Smith, Miss Myra E. Smith, Miss Grace R. Stevenson, Miss Diana L.M. Stewart, Miss Frances E. S. Sutherland, Miss Margaret A. W. Thompson, Miss Jane L. Titilah, Miss Annie Traynor, Miss Mary E. Watson, Miss Mary C. C. Wilson, Miss Nellie W. Wilson, Miss Georgina C. Young.

### DUNDEE.

Miss Vida Angold, Miss Williamina C. Clark, Miss Helen S. M. Dey, Miss Janet Drysdale, Miss Isabella Duncan, Miss Florence E. Dunn, Miss Agnes Edwards, Miss Margaret M. Hiney, Miss Catherine S. Jack, Miss Sarah A. Johnston, Miss Bessie McLean S. Lobban, Miss Euphemia R. M. Oudney, Miss Nellie F. Petrie, Miss Lillias B. S. Philp, Miss Catherine Rodgers, Miss Maggie D. McF. Stewart, Miss Margaret C. Wilson.

## EXAMINATION PAPER.

The following are the questions set in the examination of May 3rd:—

1. What are the sources of severe bleeding during and immediately after the third stage of labour? Describe the treatment.
2. Describe in detail the bathing of a new-born infant, and state under what circumstances it should be omitted. For what diseases of young infants is the hot bath recommended?
3. Describe the two forms of ante-partum hæmorrhage and state the risks (a) to the mother and (b) to the child.
4. How may the lying-in woman become infected, and what precautions would you employ (a) to guard against infection, (b) after infection had occurred?
5. What do you understand by Asphyxia Neonatorum? What are the varieties, and what treatment should be adopted in each?
6. What does the Central Midwives Board direct you to do if you find a patient with a temperature of 101° F. on the fourth and fifth days of the puerperium? Mention the possible causes of such a rise of temperature.

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## EDITORIAL.

### THE REGISTERED NURSES' PARLIAMENTARY COUNCIL.

As we report in another column, the Society for the State Registration of Trained Nurses, at its annual meeting last week, had to consider its future policy—the object for which it had been working for the last eighteen years, “To obtain an Act of Parliament providing for the Legal Registration of Nurses,” having been triumphantly achieved.

The members present endorsed the recommendation of their Executive Committee that the society should continue as “The Registered Nurses Parliamentary Council,” as there is at present no society of nurses whose sole object is to concentrate on legislation affecting nurses and national health. Yet the initiation of such legislation, and the decision to take action on proposed legislation affecting these interests require expert knowledge and promptness, both of which, from its political experience, the society is in a position to give. It, therefore, is to be congratulated on deciding to continue its useful and successful work for the benefit of the community and of the nursing profession; and, further, that it arranged an inclusive annual subscription for (1) the working expenses of the Council, and (2) THE BRITISH JOURNAL OF NURSING, which the members adopted as their official organ. They will thus be kept informed of the business of the new Council, and in touch with one another.

Two definite pieces of work were put before the members as affording scope for action in the immediate future, if necessary by securing the introduction of enabling Bills.

1. The political enfranchisement of nurses resident in hospitals and institutions.

2. The securing of rank for naval and military nurses.

At present the position of nurses in regard to the exercise of the Parliamentary Franchise is most anomalous. In one hospital they are permitted to exercise this right, in another they are denied it, though living under precisely similar conditions. This anomaly should be abolished, either by a test case or by a short enabling Act.

The question of Rank for Naval and Military nurses is one of great urgency. At present it is granted only to the members of the Canadian Army Nursing Service.

Not only military nurses in the United Kingdom, but in New Zealand and in the United States of America, are keenly alive to the necessity of rank, not primarily that their own status may be ensured, but in order that they may have the requisite authority for carrying out their instructions. It is always unfair to give responsibility without corresponding authority, and this is the present position. The members of the Nursing Services during the war could not require obedience to their directions from orderlies because they had no official rank or military status, and American nurses advanced as a reason for their plea for rank, that instances are not wanting in which the lives of the wounded were endangered for lack of authority on the part of the nurses. There is abundant evidence to show that the demand for such rank should not be delayed. The only effective way to accomplish a definite piece of work is to concentrate upon it, and “Rank of Nurses” will be one of the immediate objectives of the Registered Nurses Parliamentary Council.

## OUR PRIZE COMPETITION.

### WHAT IS BLOOD? WHAT IS ITS COMPOSITION? WHAT CAUSES IT TO CLOT?

We have pleasure in awarding the prize this week to Miss Bertha Priscilla Wiltshire, Children's Hospital, St. Michael's Hill, Bristol.

#### PRIZE PAPER.

1. Blood is the red fluid which circulates through the arteries, capillaries and veins, exchanging fluid and gases with the bodily tissues.

The chief uses of the blood are as follows:—

1. It contains the products absorbed from the foods, and conveys nourishment to all parts of the body.

2. It contains secretions needed for the general purposes of the body, prepared by such glands as the thyroid gland and the suprarenal bodies.

3. It removes from the tissues various waste products, such as carbonic acid gas, to be exhaled by the lungs; and urea and salts to be removed by the kidneys.

4. It serves to distribute heat throughout the body.

2. The blood is composed of a colourless alkaline fluid called *Liquor Sanguinis* or Plasma, in which float a great number of red corpuscles, and a smaller number of white corpuscles. The corpuscles give to the blood its colour and consistency. In the blood are dissolved the proteids which nourish the tissues—e.g., serum albumin and serum globulin; it also contains Fibrinogen, or the element of Fibrin and Thrombin, the ferment or katalytic agent present in the blood. Fibrinogen upon exposure to the air, and through the influence of the thrombin, coagulates and forms fibrin.

The red corpuscles or erythrocytes act as the oxygen carriers in the blood, each is a circular bi-concave disc; they have no nucleus, and are fairly rigid.

They contain a substance called Hæmoglobin, which acts as a medium of exchange between the oxygen of the air in the lungs and the tissues requiring it.

Hæmoglobin is a chemical compound containing the element iron, it forms when combined with oxygen, oxyhæmoglobin. The colour of the blood is due to the hæmoglobin present in the red corpuscles.

The white corpuscles or leucocytes are composed of a mass of living tissue called protoplasm, in the centre its substance becomes denser, and forms a nucleus.

The white corpuscles much resemble the lowest form of animal life, the *Amœba*; they

also, like the *Amœba*, are capable of constantly pushing out irregular processes, and ingesting foreign bodies, and are, therefore, said to be capable of "amœboid movements."

The leucocytes are able to pass through the porous walls of the capillaries into the tissues; here they perform several functions, the chief of which are the healing of wounds, the ingestion of foreign bodies, and the destruction of bacteria; their dead bodies form when in large quantities the matter or pus of abscesses.

The number of white corpuscles is one to five hundred of the red corpuscles.

There are two varieties of leucocytes; they are those with a single large nucleus (mononuclear) and those with a nucleus consisting of several different shaped parts (polymorphonuclear).

The leucocytes having a polymorphonucleus are called phagocytes; these are engaged in engulfing and destroying bacteria.

Phagocytes are called the blood scavengers.

The red and white corpuscles are constantly wearing out in the course of their ceaseless activities, new red blood cells are formed in the interior of the small hollow bones, in the red marrow that fills the cancellous tissue; some of the white cells are derived from the lymph glands, others are formed in the red bone marrow.

Clotting of the blood occurs when the blood is exposed to the air, and is due to the formation of threads of fibrin, which is a solid substance produced by the action of the ferment thrombin upon the fibrinogen, the threads of fibrin form a network in which the corpuscles are entangled.

As the clot of fibrin and corpuscles increases in density a clear fluid called serum is left.

This clotting of the blood is the chief natural defence against death from continued hæmorrhage.

#### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Marjorie Pack, Miss L. D'Oyley Watkins, Miss Adeline Douglas, Miss Dorothy Jean, Miss F. N. Cotter, Miss P. Thompson, Miss H. E. Inglis.

Miss D'Oyley Watkins writes:—"When in the body fibrinogen in the blood is in solution, but when blood is shed a ferment is formed from broken white corpuscles. This ferment changes the fibrinogen into fibrin which coagulates. Fibrin is a soft elastic substance, and during the shedding of blood the corpuscles become entangled in it."

#### QUESTION FOR NEXT WEEK.

Give instructions how to clean a bathroom.

## NURSING ECHOES.

The meeting of the League of St. Bartholomew's Hospital Nurses is to be held on July 3rd. It should be a very well attended and memorable gathering, as three members of the League have been invited to take seats on the General Nursing Council—Mrs. Bedford Fenwick, Miss Cox-Davies and Miss Villiers—and we hear all the other nurses on the Council are to be invited as guests of honour to the social gathering of the League in the Great Hall.

If nurses have any money to spare, or can bring influence on friends, we advise them to keep an eye on the needs of our own children, as the results of German barbarism are now being suffered by many. Few of our children have sufficient milk, woollen clothes, sound boots, or fresh air. Not one penny should be expended on the progeny of Germans, so long as our children—many of them fatherless through the war—need the necessities to maintain a good standard of health. The Children's Country Holiday Fund has for many years done a fine bit of work, and we are pleased to note that the Duchess of Buckingham and Chandos is organising a *matinée*, in support of the Fund, to be given at the Empire Theatre on Friday this week.

The income of the Fund, which was £23,000 before the war, has dropped to about £10,000, whereas the expenses of sending children away has doubled. There are 100,000 necessitous children waiting to be sent. Full particulars and tickets can be obtained from the *Matinée* Secretary, Children's Country Holidays Fund, 18, Buckingham Street, Strand, W.C. 2.

Nurses who handle many drugs would be wise never to taste them without a doctor's order. We have come across several sad cases of late. Fine women just becoming thoroughly demoralised through the drug habit. The story of Alice Williams, a nurse, who was charged recently at Marylebone Police Court with obtaining tubes of morphine and heroin by false pretences from a chemist, is a sad warning.

According to the evidence, this nurse obtained the drugs by presenting what appeared to be a doctor's prescription, marked "Not to be repeated." The prescription also mentioned wool, gauze and bandages, and she asked that these, instead of being given to her with the drugs, should be sent to an address in Beaumont Street. Incidentally, she mentioned that her patient was a very rich woman suffering from cancer.

The magistrate agreed to the suggestion that she should go to a home to be cured of the drug habit, and remanded the accused on her father's bail that arrangements might be made.

A meeting of the Guild of Health was held in the charming drawing room of Mr. and Mrs. Noel Buxton, 12, Rutland Gate, on Friday afternoon, the 4th instant. The Rev. Harold Anson (Chairman of the Guild) spoke to an interested audience, composed principally of Nurses, and Heads of Nursing Homes, on the subject of "Mental and Spiritual Healing." He pointed out that people with divided interests or emotions were the most liable to illness, and mentioned the "profiteer" as the most robust member of the community, as his mind was fixed on one particular business only. A further meeting is to be held in the Caxton Hall, Westminster, on June 24th, at 8 p.m.

"We are strongly impressed by the evidence as to the necessity for an adequate supply of home helps, who should be tactful, domesticated women, of good character, capable of doing invalid cooking, of looking after the household, and of taking charge of the domestic arrangements of the home."

So runs a recommendation of the Welsh Consultative Council of Medical and Allied Services in Wales.

As an initial step the Council suggest that there should be twice as many home helps as there are general practitioners in any given area.

The Council think that all health institutions, including voluntary hospitals, should form part of the future public services.

The whole of this scheme, states the report, will be dependent for its efficient administration on a large systematic motor transport and telephone service. Such services would go some way to putting a patient in a rural district in no worse a position than a patient in an urban district.

The Welsh Consultative Council has, we presume, few women on it, and certainly little, if any, expert nursing opinion, or it would not so glibly refer to these rarer than rubies "domesticated women." Home helps by all means—would not the average housewife welcome these *rare aves*—but from whence are they to be procured?

We presume the Welsh Consultative Council realises that the present-day flapper seldom develops into the tactful jewel of domesticity of which they are so commendably enamoured!

## SOCIETY FOR THE STATE REGISTRATION OF TRAINED NURSES.

The annual meeting of the Society for the State Registration of Trained Nurses was held at 431, Oxford Street, London, W.1, on Friday, June 4th, at 4.30 p.m. The President, Mrs. Bedford Fenwick in the chair.

The minutes of the last meeting were read and confirmed.

The annual report was presented by the Hon. Secretary, Miss M. Breay.

### ANNUAL REPORT.

The annual report opened with the inspiring announcement: "We meet to-day to present the eighteenth annual report of the Society for the State Registration of Trained Nurses, and to put on record the fact that the object for which our Society was founded in 1902 is accomplished, namely 'to obtain an Act of Parliament providing for the legal Registration of Trained Nurses,' the Royal Assent having been given to the Nurses' Registration Acts for England and Wales, Scotland and Ireland respectively on December 23rd, 1919."

It then went into details as to the progress of the Bills through the various stages, with which the readers of this Journal are familiar, and mentioned that the President, Mrs. Bedford Fenwick, Miss M. Huxley, the Senior Vice-President, and the following members had been appointed on to the General Nursing Councils in the United Kingdom: Miss K. L. Burleigh, Miss A. Dowbiggin, C.B.E., R.R.C., Miss I. Macdonald, Miss M. O'Flynn, Miss A. Reeves, and Miss S. A. Villiers.

Congratulations on the passing of the Registration Acts had been received by the President of the Society from the Hon. Secretary of the International Council of Nurses, Miss L. L. Dock, from Miss Hester Maclean, Assistant Inspector and Registrar in the Department of Public Health, New Zealand, which Dominion was the first to pass (in 1901) a separate Act for the State Registration of Nurses, from the National Association of Nurses of India, from the President and Canadian National Association of Trained Nurses, from Miss Helen Randal, editor of the *Canadian Nurse*, from the Calgary Association of Graduate Nurses, Alberta, from the President and National Council of Nurses of Denmark, from Miss Bergljot Larsson, President of the Norwegian Council of Trained Nurses, from the Florence Nightingale School of Nursing, Bordeaux, from Nosokomos, the Dutch National Association of Nurses, from Miss Greta Lyons, President of the Royal Victorian Trained Nurses' Association, Australia, and others.

The Executive Committee had met six times, and a Sub-Committee had considered and reported on the question of an eight-hours' day for nurses.

The Executive had had under consideration the future of the Society and its report and

recommendations were before the annual meeting for discussion.

### THE SUCCESSFUL RESULT OF THE SOCIETY'S WORK.

Miss Mollett said that arising out of the report, and the successful result of the Society's work, she thought the words of Philip of Spain to William of Orange were applicable to their President: "Not the States but you."

Mrs. Fenwick said Miss Mollett's words were very flattering, but it was impossible to do things without co-operation and active support. No one was stronger than his backing.

Miss Mollett, in reiterating her opinion, said that Mrs. Fenwick and herself were the only ones left of the little group of Matrons who met at 20, Upper Wimpole Street in November, 1887, when Mrs. Fenwick first proposed the foundation of the British Nurses' Association with State Registration of Nurses, as its main objective.

### FINANCIAL STATEMENT.

The Financial Statement for the year ending April 30th, 1920, showed a balance in hand on May 1st, 1919, of £95 18s. 2d. Subscriptions and donations during the year had been £83 1s. 3d., a total of £178 19s. 5d. The expenditure during the year was £163 16s. 3d., the principal items being printing and stationery, £110 3s. 3d. and postages £25 11s. 6d. Nothing had been spent on office expenses or clerical help. The year closed with a balance at the bank of £15 3s. 2d.—the great expense of the Society's propaganda, while the Nurses' Registration Bills were before Parliament, having been detracted from the subscriptions and donations of the members—money spent to some purpose. (Hear, hear.)

### THE FUTURE OF THE SOCIETY.

The President said that the object for which the Society had been founded having been achieved, it remained with the annual meeting to decide upon its future, whether it should dissolve, or adopt a fresh title and objects.

The Executive took to heart the hope expressed by the Minister of Health in January of the present year when he addressed the Society at 11, Chandos Street—that it would not abandon the experience it must have gained, and the allegiance it must have gathered round it, because it was essential for the benefit of the nursing profession, as it was for every other, that it should gradually arrive at some arrangement which would provide for it an instructed body who would be well informed of its requirements, and could be turned to for advice and suggestion if necessary.

### THE EXECUTIVE COMMITTEE'S REPORT.

The President said further.—

The question of the future of the Society was referred by the General Meeting in January to the Executive Committee for consideration and report, and the Committee beg to recommend that the Society should be reconstituted as "The



Registered Nurses' Parliamentary Council" and that it should adopt the following objects:—

### THE REGISTERED NURSES' PARLIAMENTARY COUNCIL.

#### OBJECTS.

1. To initiate, if necessary, legislation for the benefit of the Nursing Profession.
2. To consider and take action on any proposed legislation, or on the application of any Act of Parliament, affecting the Nursing Profession.
3. To consider questions of National Health before Parliament.
4. To use and support THE BRITISH JOURNAL OF NURSING as its official organ.

#### MEMBERSHIP.

Members must be "Registered Nurses."

#### ANNUAL SUBSCRIPTION.

£1 IS. 10S. 6d. for work. 10S. 6d. for subscription to THE BRITISH JOURNAL OF NURSING.

#### BILLS TO PROMOTE.

Questions which the Council might usefully consider in the immediate future, with a view to securing legislative action.

1. The enfranchisement of nurses resident in Hospitals and Institutions.
2. Rank for military nurses.

#### THE POLITICAL STATUS OF RESIDENT NURSES.

The President pointed out that the political status of nurses resident in hospitals and institutions was most anomalous, and must be defined. In one hospital their right to exercise the Parliamentary franchise was admitted, in another it was denied. The right of a nurse to vote must not be at the mercy of any agent or revising barrister. If under the present Act this right was not secured, then the Act must be amended. This could be done under the Representation of the People Bill.

#### RANK FOR NURSES.

The Canadian Army Nursing Service was the only Military Nursing Service in which the Sisters and Nurses had military rank, the highest rank being that of Major, with its emoluments, held by Miss Margaret Macdonald, Matron-in-Chief of the C.A.N.S., during the war.

It was a great disability in a Service governed by rank that nurses did not possess this means of ensuring their status and authority. It was not primarily a question of emoluments. The American nurses have since the war, actively organised themselves to obtain rank for nurses, as included in the Army Reorganisation Bill. When this Bill was under consideration of the House of Representatives (U.S.A.) on March 12th, Section 10, providing for Rank for Nurses, was granted by the House, in Committee of the Whole, without a dissenting voice. It remains to be seen if the Bill has been approved by the Senate.

#### EXECUTIVE'S RECOMMENDATIONS APPROVED.

Each of the Executive's recommendations was then proposed, seconded and unanimously approved, with the addition of the inclusion of Naval

with Military Nurses in the demand for rank. The recommendations were then adopted as a whole.

In regard to the importance of watching the application of Acts affecting nurses, the President instanced the action of the General Nursing Council for Scotland, in issuing in the lay press, an advertisement for a Registrar, which contained no proviso that candidates for the post must be trained nurses. Presumably, therefore, the Scottish Council, which was financed by the registered nurses, merely required a clerical worker. This had given great offence in Scotland, where nurses agreed with us that what was required in a Registrar was mainly a competent nurse administrator, and a strong recommendation had already been sent up to the General Nursing Council for Scotland by the Professional Union of Trained Nurses, Glasgow "that the appointment be limited to a trained nurse, with administrative ability, and conversant with the standards of nursing education."

Dealing with the guinea subscription the President pointed out that the work of the Society in the past had been largely carried on on the most generous donations of the few, and by gratuitous clerical service, and Miss Mollett remarked that the finest work in the world was that done for love.

#### PROVISIONAL COUNCIL.

It was agreed that the new Council should be founded on an individual basis, and not through the Federation of Societies, and that a Provisional Executive, with power to add to its number, should be nominated representative of the following branches of nursing: General, Children, Infirmary, Fever, District, Private, Navy, Military, Mental, Maternity, Municipal, Venereal, Infant Welfare, Public Health, Insurance, Nursing Homes.

The following ladies who were in the room consented to serve: Mrs. Bedford Fenwick, Miss M. Breay, Miss Bushby, Miss Kingsford, Miss Schuller, Miss Ramsden, Miss B. Kent, Miss I. Macdonald, and Miss B. Cutler.

The Hon. Officers consented to act until the new Council and its officers were elected.

#### BADGE.

It was agreed that a Badge in the form of a bar bearing the word Registration, dated 1902-1919, should be designed, which members of the Society for the State Registration of Trained Nurses should be entitled to wear, to show they had helped to win legal status for their profession. One member suggested that the initials "E.G.F." should be engraved on the back, which was agreed, and Miss Mollett expressed the opinion that she had "hit the bull's eye."

Miss Mollett moved a most cordial vote of thanks to Mrs. Bedford Fenwick for her life's work for the State Registration of Nurses.

She also spoke of those who had fallen by the way. They would hold in honoured memory those who had fought the good fight in the past, and who had not lived to see victory achieved.

The meeting then terminated.

## A PIONEER REGISTRATIONIST.

It was a great pleasure to have Miss Mollett again present at a Registration meeting, and her colleagues were delighted to find she was recovering from her serious accidents which had caused lameness for so long. It was announced that Miss Mollett was going to Chili, as the guest of her sister Lina, and all present wished her *bon voyage*.

## EX-ARMY NURSES AND THE UNITED SERVICE FUND.

A meeting, at which the Dowager Countess Airlie presided, was held at St. Thomas' Hospital on June 1st, of ex-Army nurses, representing Queen Alexandra's Imperial Military Nursing Service, and the Territorial Force Nursing Service, for the purpose of electing a representative of the Nursing Profession to sit upon the Committee which is to administer the United Services Fund. The Fund is derived from the profits of the naval and military canteens. The chairman stated that when the money was distributed it would be necessary to appoint a Committee of Nurses to deal with it. Dame Ethel Becher was elected as the representative on the Committee.

## ARMY NURSES' BONUS.

The Army Council has decided that pending the issue of general instructions regarding the cessation of Army of Occupation bonus, and the settlement of the new rates of pay at present under consideration, Army of Occupation bonus will be issued to members of Q.A.I.M.N.S. (regulars). This bonus will not, however, be issuable for periods after April 30th, 1920, to temporary nurses (Q.A.I.M.N.S. Reserve, T.F.N.S., V.A.D. Nursing members, and Special Military probationers) unless they are in hospital or on sick leave, and are not in a position to sign the form of agreement to serve at home or abroad for a period not exceeding either one or two years. (A.F.W. 5133.)

## NATIONAL UNION OF TRAINED NURSES.

The Viscountess Rhondda, Chairman of the Ministry of Health Women's Consultative Council, will formally open the Club at 46, Marsham Street, Westminster, S.W.1 (which will be open to members on June 12th), at 5.30 p.m. on Tuesday, June 15th.

A Strawberry Tea will be provided at 4.30.

Members are cordially invited to attend, and are asked to notify the Hon. Secretary, by card, of their ability to do so.

Members, please note: Lectures will be given at the Club on the third Friday in each month, at 7 p.m.:-

June 18th.—"Modern Nursing of Fevers," by Miss Stewart, A.R.R.C., Home Sister, South Western Hospital.

## MEETING AT LONDON TEMPERANCE HOSPITAL.

Mr. Herbert Paterson, F.R.C.S., Surgeon to the London Temperance Hospital, presided at a meeting held in the Board Room of the Institution on the evening of June 5th, when Miss Isabel Macdonald, Secretary of the Royal British Nurses' Association, and Miss Sherriff-Macgregor, Organising Secretary of the College of Nursing, Ltd., spoke on the aims of these bodies.

Miss Sherriff-Macgregor began by stating that, as all nurses knew, when war broke out there was little organisation among nurses, and little organisation of organisations. The College of Nursing, Ltd., was formed to organise nurses, and aimed at keeping up the standard of training and of helping the work of all nurses.

It desired that every nurse should express her views, and stood for the high ideals of nurses, and wished to protect them from being exploited. Nursing could, she said, never be a trade any more than the medical profession.

Miss Macdonald prefaced her remarks by saying she could not agree with the previous speaker, as to there being no organisation amongst nurses previous to the war. She described the organisation of the Royal British Nurses' Association, founded in 1887, the only body of nurses incorporated by Royal Charter, and possessing the status and prestige which no other organisation of nurses in the United Kingdom possessed, or was ever likely to possess. She mentioned in detail the various activities carried on by the Association under the Royal Charter, and that a number of influential and self-governing societies were affiliated to it.

She spoke also of the work of the Central Committee for the State Registration of Nurses, in which, with the British Medical Association, were grouped together all the societies of nurses working for State Registration, which had been working for the organisation of the nursing profession through State Registration, some of them for many years.

In conclusion, speaking of finance, she said the members kept up their own Association. They did not want flag days and similar forms of money-making. Those who wanted that kind of finance knew where to get it. The members of the R.B.N.A. believed in sturdy independence and self-respect. (Applause.)

## QUESTIONS ADDRESSED TO MISS SHERRIFF-MACGREGOR.

Questions were then invited, most of which were directed to Miss Sherriff-Macgregor.

Question (Miss Sadlier): Would the guinea paid by the College members put them on the State Register? Answer: The College Council were waiting to find out what the General Nursing Council was going to decide. A second question elicited the reply that the College would pay the guineas.

*Question* (Miss Robbins): Why did the College oppose the Nurses' Registration Bill last year?—*Answer*: Because it thought the Council proposed was not democratic enough. A certain proportion of those elected by the nurses had to be Matrons, the College Council thought they should all be nurses.\* A member of the audience here pointed out that not one of the members of the Council defined in the College Bill need have been a member of the nursing profession.

*Question* (Miss G. Lord): What was the standard required for hospitals, for their training to qualify for the College Register?—*Reply*: Forty occupied beds.

*Question* (Miss A. Cattell): Had "Nurse Juliet" been found? Plenty of public money had been subscribed to permit of the relief of her necessities. *Reply*: Miss Sherriff-Macgregor knew no more of "Nurse Juliet" than the inquirer.

*Question* (Miss Breay): Was the representative of the College aware that the Society for the State Registration of Trained Nurses was so highly organised that in 1908 it secured the passage of its Nurses' Registration Bill in the House of Lords, and before that (in 1904) the appointment of a Select Committee of the House of Commons to enquire into the whole question of Nurses' Registration?

*Answer*: Miss Sherriff Macgregor was understood to say that she was aware of it.

*Question* (Miss Breay): Were nurses who joined the College of Nursing, Ltd., informed before doing so that they were liable to be removed by the Council from its Register without power of appeal? Miss Sherriff Macgregor was slurring over this question when it was pointed out to her that she had not answered it.

*Answer*: There was nothing to say a nurse could not appeal; of course, she could appeal.

Miss Breay said that reference to its Memorandum and Articles of Association would show that absolute power was given to the College Council to remove a nurse's name from its Register as it might in its discretion think proper, without giving her an opportunity of defending herself.

*Question* (A Visitor): Must a nurse have three years' training before being eligible for membership. *Reply*.—Yes.

#### QUESTIONS ADDRESSED TO MISS MACDONALD.

*Question* (A Member of the Nursing Staff of the L.T.H.): Could she say why the new Society came into being when there were such excellent societies already in existence?

*Reply*: It was a question of employment and labour. The Royal Association of Nurses was in the hands of the nurses, that was why a number of Matrons objected to it. She has known instances of Matrons writing to nurses to advise them not to join it. The College was the employers' organisation. Its government was in the hands of persons in the control of Hospital Boards.

\*To prove how misleading was this reply, the fact is that not one nurse was recommended to the Minister for nomination on to the General Nursing Council by the College Council—all its representatives are Matrons.

*Question*: Why cannot the two Societies join together?—*Reply*: The Royal British Nurses' Association had tried in vain to meet the overtures of the College. Unity was very desirable but the R.B.N.A. stood for certain principles, and they could be too dearly sold. If the College was going to be a College let it take on the functions of one. At present it was not an educational College any more than the Nation's Fund for Nurses was a national fund.

Miss Steuart Donaldson, the Matron, expressed her grateful thanks to the speakers for coming to address the nurses. It was the duty and responsibility of every Matron to give nurses under training the opportunity of hearing about, and forming an independent opinion on, nursing politics.

The Chairman remarked that few matrons were so impartial as Miss Donaldson, and extended an invitation to those present to adjourn to the dining room where coffee was served.

### THE IRISH NURSES' ASSOCIATION.

The usual monthly meeting of the I.N.A. was held at 34, Stephen's Green, Dublin, on June 5th, Miss Hezlett, R.R.C., President, in the chair. There was a good attendance. The sub-committee for the summer session was appointed as follows:—Misses Huxley, Carson-Rae, O'Flynn, Carre, Thornton. A letter from the Cork Nurses' Association was read asking the co-operation of the I.N.A. and sending full details of their proposed scheme for aiding Poor-Law Nurses. The National Council of Women of Great Britain and Ireland wrote asking for three representatives at their annual meeting in Bristol. Misses Huxley, Carson-Rae and Michie were selected. Miss Rohde was accepted as a member.

### VENEREAL DISEASE PREVENTION.

Lord Willoughby de Broke presided on June 3rd over the annual meeting of the National Council for the Prevention of Venereal Disease, held at 1, Wimpole Street, London, W. He strongly condemned the "policy of suppression" adopted by the Government in all matters relating to venereal disease, and moved a resolution asking that the Ministry of Health should authorise chemists to supply means of self-disinfection, which they are prevented from doing under Act of Parliament. Dr. Saleeby said he believed that the diseases were on the increase, despite official statements and "explanations." The resolution was carried.

### MEDALS FOR NURSES.

There was a large attendance in the Board Room of the Devon and Exeter Hospital, Exeter, when the Chairman, Mr. E. C. Bell, presided at the distribution of medals and certificates to the nurses successful at the recent examination. Mrs. Stirling, wife of the President, distributed the honourable awards.

The awards were: Gold medal, Nurse Harrison; Silver medal, Nurse Brocklehurst; Certificates, Nurses Bird, Skinner, Sydenham, Exoley, Symons, Richardson, Wilkins, Routley, Lembourne, Allen, Balkwill, Edwards.

## APPOINTMENTS.

## MATRON.

**Hospital for Women, Soho Square.**—Miss Mabel Mehew has been appointed Matron. She was trained at St. Mary's Hospital, Paddington, and has held the positions of Ward Sister, Theatre Sister, and Assistant Matron at that hospital.

**National Hospital for Diseases of the Heart, Westmoreland St., W.**—Miss Gertrude Morris has been appointed Matron. She was trained at the St. Mary-lebone Infirmary, where she subsequently held the position of Sister. She has also been Sister-Housekeeper and Assistant-Matron at St. Pancras Infirmary, and Sister at the Third London General Hospital, Wandsworth.

**Haslam Maternity Home and Infant Hospital, Ravenswood, Heaton, Bolton.**—Miss Clara Jane Baron has been appointed Matron. She was trained at the Liverpool Royal Infirmary, and has been for five years District Midwife at St. Mary's Hospital, Manchester, has done private nursing, one year Military Nursing as Matron or Sister-in-Charge, and has been for six years Matron of the Victoria Nursing Institution, Ripon.

**Holme Valley Memorial Hospital, Huddersfield.**—Miss J. Dunning has been appointed Matron. She was trained at the Royal Infirmary, Chester, and has held the positions of Sister at the Bury Infirmary, and the Royal Infirmary, Manchester, of Matron at the Cottage Hospital, Maryport, and of Sister-in-Charge of Seymour Park Military Hospital, Old Trafford, Manchester.

## ASSISTANT MATRON.

**Beckett's Park Hospital, Leeds.**—Miss A. E. Billinton has been appointed Assistant Matron at the Beckett's Park Hospital, Leeds, now taken over by the Pension Board. She served in the same hospital throughout the war, and has received the Royal Red Cross (Second Class).

## SISTER.

**Haslam Maternity Home and Infant Hospital, Heaton, Bolton.**—Miss L. E. Evans and Miss Margaret E. Keohanes have been appointed Sisters. The former was trained at Wolverhampton Infirmary, and has experience in Infirmary, women's and Military nursing, and as a health visitor. The latter was trained at Spittals Hospital, Newcastle, Staffs, where she is Sister, and has also done Military nursing.

## MATERNITY STAFF NURSE.

**Erdington Infirmary, Birmingham.**—Miss Kathleen E. B. Thompson has been appointed Maternity Staff Nurse. She was trained at Firvale Hospital, Sheffield.

## QUEEN VICTORIA'S JUBILEE INSTITUTE

## TRANSFERS AND APPOINTMENTS.

Miss Eva Maguire is appointed to Kent C.N.A. as County Superintendent; Miss Catherine M. Williams is appointed to East Suffolk C.N.A. as County Superintendent; Miss Edith Deadman is appointed to West Sussex C.N.A. as Assist. Superintendent; Miss Amy H. Hyde to Somerset C.N.A. as an Assist. Superintendent; Miss Ella G. Anderson to Bosham; Miss Helen F. Barry to Kilburn; Miss Beatrice M. Booth to Sheffield; Miss Gertrude E. Davies to Somercotes; Miss Lilian Fairweather to Sacriston; Miss May Griffiths to Wetherby; Miss Sarah E. Hutton to Winstan and Grothwaite; Miss Nellie E. Jones to Wetherby; Miss Grace M. Rider to Brighton; Miss Eva M. Sutton to Leicester; Miss Elizabeth L. Thomson to Bideford.

## HONOURS.

## BIRTHDAY HONOURS.

## KAISAR-I-HIND MEDAL.

The King has been graciously pleased on the occasion of His Majesty's Birthday, to make the following awards of the "Kaisar-i-Hind Medal for Public Services in India" of the First Class:—

Plamondon, Rev. Mother Sacramento Clara, Sister, in St. Joseph's Leper Asylum, Burma.

Webb, Miss Millicent Vere, Lady Superintendent, Dufferin Victoria Hospital, Calcutta, Bengal.

## ORDER OF THE BRITISH EMPIRE,

## K.B.E. (CIVIL DIVISION).

Dundas-Grant, James, Esq., M.A., M.D., F.R.C.S., eminent aural specialist.

## ALLIED DECORATIONS.

## BRITISH WAR SERVICE RECOGNISED.

The King has been pleased, by Warrants under his Majesty's Royal Sign Manual, to grant permission to wear the following decorations, which have been conferred in recognition of valuable services rendered during the war:—

## CONFERRED BY THE PRESIDENT OF THE FRENCH REPUBLIC.

## ORDER OF THE LEGION OF HONOUR.

*Officer.*—Dudley Holden Illingworth, Esq., Directeur Général Comité Britannique Croix Rouge Française.

*Chevalier.*—Herbert Brown, Esq.; Philip Aveling Wilkins, Esq.; Harold Fraser Simson, Esq.; Angus Faulkner, Esq.; Percy Collins, Esq.; Walter Harold Cobb, Esq.; David Baird Smith, Esq.; Robert John Smith, Esq. (Comité Britannique Croix Rouge Française). Miss Edith Mary Pye, Directress of the English Lying-in Hospital of the Society of Friends at Chalons.

## FOREIGN DECORATIONS.

## CONFERRED BY THE KING OF THE BELGIANS.

## MEDAILLE DE LA REINE ELISABETH AVEC CROIX ROUGE.

Nursing Sister E. M. Pratt, Uganda Med. Serv.; Hon. Nursing Sister W. Watson, Uganda Med. Serv.

## CONFERRED BY THE PRESIDENT OF THE FRENCH REPUBLIC.

## MEDAILLE DES EPIDEMIES "EN ARGENT."

Matron M. D. E. Knight, A.R.R.C., Queen Alexandra's Imp. Mil. Nurs. Ser. Res.; Matron A. Lyon, T.F. Nurs. Ser.; Matron M. McDougall, T.F. Nurs. Ser.

## MEDAILLE DES EPIDEMIES "EN BRONZE."

Staff Nurse A. C. Weller, Vol. Aid Detacht.

## MEDAILLE DE LA RECONNAISSANCE FRANÇAISE.

By decree of the President of the French Republic the medal of the Reconnaissance Française has been conferred, with the following citations on Dr. Noel Bardswell, specialist in chest diseases, who put his scientific knowledge at the disposition of the British Committee of the French Red Cross, and who contributed largely to the good working of the agricultural colony opened at the Chateau de Silley for consumptives.

The medal has also been conferred on Miss Cicely C. du Sautoy, Lady Superintendent in important hospital centres from September, 1916, to December, 1918. Has been remarked for her zeal, her devotion and her competence.

## OUTSIDE THE GATES.

The quinquennial meeting of the International Council of Women will be held in Christiania from September 8th to 18th. The Queen of Norway, the Norwegian Government and the Christiania municipal authorities are arranging entertainments in honour of the meeting. The proceedings will be held daily in the Norwegian Parliament buildings, and in the evenings there will be public meetings in the largest halls of the town. Delegates will take part in the gathering from many parts of the world.

The National Council of Women announces that its Annual Meeting will be held at Bristol from 11th to 15th October. Further information will be given at a later date.

The Representation of the People Bill, which would confer the franchise on women from the age of 21 upwards, was further considered last week by a House of Commons Standing Committee.

Sir Kingsley Wood said the Government considered the Bill premature. There was no urgency, because as far as one could judge, there was not the slightest possibility of an appeal to the country for some years to come. Sir Kingsley Wood added that it did not appear to be worth while going on with the Bill.

Mr. Sudgen said that the promoters had no intention of dropping the Bill, as that would not be just to great masses of women workers in the country.

The Committee decided to go on with the discussion. It was agreed to pass Clause 1 as amended, placing men and women on an equality in regard to the age limit, namely 21, but leaving the existing forms of qualification unchanged. It was agreed that the Bill should come into operation in 1923, unless an earlier date should be fixed by Order in Council to meet electoral emergencies.

We are of opinion that the age of 25 would be quite soon enough to enfranchise both men and women.

Miss Maude Royden preached in the pulpit of St. Peter's Cathedral, Calvin's old church at Geneva, last Sunday. It is the first time a woman has ever occupied it, and Miss Royden did so on the invitation of the Council of the International Women's Suffragist Alliance, which is holding a week's gathering in the city.

As a permanent memorial to Josephine Butler—to whom none exists—it is proposed to found in Liverpool, her native city, a training centre for workers in the cause of social purity, to be called the Josephine Butler Training House. It is desired to raise at least £10,000, to buy and equip the Liverpool Training House, and to form a fund to provide grants to approved training centres.

## BOOK OF THE WEEK.

### "HARVEST."\*

We are told that "the best is kept till last," and this last book, from the pen of Mrs. Humphry Ward, has an outlook and breadth which we have not always been able to trace in her writings.

Its subject is attractive, and we must not complain of its being another war novel, as the war offered so many romantic situations that it is unreasonable to suppose writers will not succumb to the temptation of spinning yarns around them.

Again, this book deals with the land and outdoor farm life, and Mother Nature is bound to make her appeal if she is dealt with sympathetically.

"Harvest" is a romance and a tragedy.

Rachel Henderson, with some odd thousands bequeathed to her in a legacy, decided to make a venture in farming.

She was not a novice in the art, as, though still only twenty-four years of age, she had spent her early years in Canada, where she had gained considerable practical experience. A good-looking, alluring girl, giving the impression of being younger than her actual years.

She arrived in the wagonette amid the criticisms of the village folk, who were sceptical of her ability for her undertaking.

"The old horse jogged on, and presently from a row of limes beside the road, a wave of fragrance, evanescent and delicious, passed over the carriage," Miss Henderson sniffed it with delight. "But one never has enough of it," she thought discontentedly. And then she remembered how as a child she used to press her face into the lime blossom—passionately greedily, trying to get from it a pleasure greater than it would ever yield.

For the more she tried to compel it by a kind of violence, the more it escaped her.

She used to envy the bees lying drunk among the blooms. They at least were surfeited and satisfied. It struck her as a parable of her whole life—so far."

From this passage, it will be gathered that Rachel's nature was far from being a placid one. She had, in fact, in her short life embarked on stormy seas, and the farm life on which she was about to enter, seemed to promise her a haven where interest and healthy toil would recreate her.

Since it is not possible to imagine a personality without some sort of description, we give the following picture of Rachel in her early days at the farm.

Rachel had put on a blue overall above her land-worker's dress. Her beautiful head, with its wealth of brown hair, and her face with its sensuous fullness of cheek and lip, its rounded lines and lovely colour, like a slightly over-blown rose, were greatly set off by the simple folds of blue linen. Her shapely feet and legs in their khaki stockings and shoes completed the effect of lissom youth.

\* By Mrs. Humphry Ward. Collins & Sons, London.

But the atmosphere of the harvest field, its ripeness and glow seemed to be still about her.

Rachel was born to attract, and, in spite of her healthy occupation, incense offered at her shrine was by no means distasteful to her.

Janet, her friend and partner, her elder by five years, was only tenderly amused at her.

All Rachel's foibles as far as she knew them, were pleasant to her. They were in that early stage of new friendship when all is glamour. Janet's verdict was, "She is a darling, but a mystery."

She was a greater mystery than faithful Janet had any idea of. All went well and Rachel, in spite of that mysterious something in her life, seemed to be heart and soul in her work until the disturbing element of love, the devoted love of Captain Ellesborough of the American Army, once more caused the waters of her life to be troubled.

Then the secret of her life had to be divulged. Not only was she an innocently divorced wife—which Mrs. Humphry Ward appears to consider no bar to re-marriage—but poor Rachel had at the time of her husband's brutality put herself out of court by seeking the protection of another man.

This, of course, was not an easy problem for Rachel to solve alone. She decides to tell her lover of her first marriage and to leave buried the other incident which she so bitterly regretted.

There is a dramatic conclusion to the enigma when Rachel, on Janet's advice, writes a full confession to the man she loves.

He does not fail her and answers to the supreme test of love. But Rachel's troubled life was to find no satisfaction here, for she dies, shot by the man who had been her husband, while her lover's kiss of forgiveness was yet on her lips.

H. H.

### "PEP."

By GRACE G. BOSTWICK.

Vigor, vitality, vim, and punch—

That's pep!

The courage to act on a sudden hunch—

That's pep!

The nerve to tackle the hardest thing,

With feet that climb and hands that cling,

And a heart that never forgets to sing—

That's pep!

Sand and grit is a concrete base—

That's pep!

Friendly smile on an honest face—

That's pep!

The spirit that helps when another's down,

That knows how to scatter the blackest frown,

That loves its neighbour and loves its town—

That's pep!

To say "I will"—for you know you can—

That's pep!

To look for the best in every man—

That's pep!

To meet each thundering knockout blow,

And come back with a laugh, because you know

You'll get the best of the whole darn show—

That's pep!

*American Magazine.*

## TURNING THE TABLES.

It was very sultry, and Nurse's bag was heavy and her feet ached, and altogether she was very glad that she had arrived at her last case of the morning.

Maggie was a hip case, an elfin child that no amount of washing ever made look really fresh. And oh dear! Nurse's heart sank at the lively company that were doing their best gymnastics in Maggie's bed.

"Did you give your mother my message, after I left yesterday, Maggie?"

"What you says about the fleas, Nurse?"

"Yes! Did you tell her that I said she must get rid of them?"

"Yus I telled 'er, and she says she can't understand there bein' any at all, she says she never see sich a thing till you come, she says."

No adequate reply occurring to Nurse, she finished her work in silence, and then went home and took a bath.

## COMING EVENTS.

June 15th.—National Union of Trained Nurses. The Viscountess Rhondda opens Club, 46, Marsham Street, S.W. 5.30 p.m.

June 18th.—National Union of Trained Nurses. Lecture. "Modern Nursing of Fevers," by Miss Stewart, A.R.R.C. Home Sister, South Western Hospital. 46, Marsham Street, S.W. 7 p.m.

June 19th.—Poor Law Infirmary Matrons' Association. Eustace Miles Restaurant. 5.30 p.m.

June 19th.—Royal British Nurses' Association. Address on "The Need for Nurses Engaged in Private Visiting Practice, and in District Nursing, to consider the Municipal Organization of Home Nursing," followed by discussion. Speaker, Miss H. G. Klaassen. 10 Orchard Street, Portman Square, W.1. 3 p.m.

June 21st.—Royal British Nurses' Association. Annual Meeting. 11, Chandos Street, Cavendish Square. 3 p.m.

June 21st-25th.—General Lying-in Hospital, York Road, Lambeth, S.E.1. Post Graduate Week for Midwives.

June 22nd to 25th.—Tenth Annual Nursing and Midwifery Exhibition and Conference, Royal Horticultural Hall, Westminster. Noon to 9 p.m.

June 23rd.—Central Midwives Board. Penal Cases. 10.30 a.m. Monthly Meeting.

June 24th.—Overseas Nursing Association. Annual Meeting. Norfolk House, St. James' Square, S.W. 1. H.R.H. Princess Beatrice will honour the meeting by being present. Chairman, the Right Hon. Viscount Gladstone. 3.30 p.m.

## A WORD FOR THE WEEK.

"Every man of character," said an Elizabethan, "hath a touch of singularity and scorns somewhat."

"The price of Liberty is eternal vigilance, so the price of Progress is man's unceasing effort."





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

*The*  
**Boots**  
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**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## PREVENTION OF VENEREAL DISEASE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Miss Bielby's letter in this week's BRITISH JOURNAL OF NURSING gave me a thrill of satisfaction and a feeling of fellowship in my groping after the real remedy for venereal disease. To me mere physical disinfection does indeed seem "tinkering with the horror"; for I can't help thinking that to most men escaping the consequences of their wrong-doing is positively dangerous from a moral point of view, and I believe the general use of prophylactic packets would do untold harm.

Of course the alternative is to allow the disease to go unchecked. But are we called upon to make a decision between these two evils? Is it not rather a call to a larger faith?

There are still a multitude who have not bent the knee to Baal, and though we are blinded by our exceedingly practical commonsense that must be satisfied by *results*, the Hosts of the Lord are still there ready to fight on our side if we will.

Success! Failure! How are we to judge it? Has not the greatest apparent failure of all times furnished us with our eternal salvation? Commonsense, practical measures, certainly; but let us not forget in our efforts to stem this evil to hold to our highest ideals at any cost.

I am, Madam,

Yours faithfully,

MARIE VAUGHAN WINTERS.

General Hospital,  
Nottingham.

## OTHER MATRONS PLEASE FOLLOW SUIT.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I was one of those who, on seeing the notice in the Nursing Press, went to the Temperance Hospital to hear the R.B.N.A. and College, Ltd., speakers. The College representative made several incorrect statements, I have proved them to be so from their own literature. The R.B.N.A. speaker's remarks rang true, and there was no doubt with which side the honours lay. But what I do wish to express is my admiration of the right-minded attitude of the Matron of the Temperance Hospital, who *dared* to allow her nurses to hear both sides and to judge as their own consciences dictated. All honour to her, and I congratulate the Temperance nurses on having such a Matron.

I am, &c.,

A LOVER OF FAIR PLAY.

[The fact that the officials of the majority of London and other hospitals have refused facilities to their nurses to hear speakers from nurses' organisations, other than those of the College of Nursing, Ltd., has naturally aroused indignation and adverse criticism.—ED.]

POOR LAW MATRONS READY AND WILLING TO HELP THE GENERAL NURSING COUNCIL.  
To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I should like to thank you for your appreciative notice in last week's BRITISH JOURNAL OF NURSING of the work in the past of the Poor Law Infirmary Matrons' Association, and the help it could give in the future. You mention that this could be extended through Miss Dowbiggin to the General Nursing Council. I expect when writing you overlooked the fact that Miss Seymour Yapp—unfortunately away through illness for the moment—is also a representative of Poor Law nursing on that Council, and one who has very great knowledge of Poor Law nursing conditions, especially in the provinces.

I feel sure that our Association—which includes among its members nearly all the Matrons and Superintendent Nurses of those infirmaries recognised by the Ministry of Health as training schools for nurses—will unite to help in every way in their power the important work now being carried out by the General Nursing Council.

Both Miss Dowbiggin and Miss Seymour Yapp are members of our Executive Committee, elected by postal ballot.

Yours very truly,

ELEANOR C. BARTON,  
President Poor Law Infirmary  
Matrons' Association.

Chelsea Infirmary, S.W.

## KERNELS FROM CORRESPONDENCE.

## QUEL PRIX?

London Hospital Matron: "What price trained nurses? I enclose cutting from *Times* :—

"Ex-V.A.D. required as companion to invalid lady who proposes to reside in flat or hotel on the South Coast for the summer. Applicant must be a capable nurse as well as companion, and willing to generally assist in looking after the invalid's welfare. Salary £150 per annum, all found.—Applications to be made to —."

## THE RIGHT SPIRIT.

Another V.A.D.: "I also have refused to compete any longer with trained nurses. I never could resent their considering me a 'blackleg,' as more than one matron gave me charge of a ward during the war. I am now knuckling under and mean in time to pass the State Examination and become a 'registered nurse.'"

[We commend this spirit.—ED.]

## NOTICE TO CORRESPONDENTS.

Will correspondents kindly note that, as each letter now costs 2d., a stamp for this amount must be enclosed if an answer is required. Also, if articles are submitted for approval, a stamped and addressed envelope must be sent, otherwise, in the event of non-acceptance, the MSS. cannot be returned.

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

June 19th.—What do you know of hay fever, its causes and treatment?

# The Midwife.

## CENTRAL MIDWIVES' BOARD.

### LIST OF SUCCESSFUL CANDIDATES.

At the Examination of the Central Midwives' Board, held in London and the Provinces on May 4th, 1920, 816 candidates were examined, and 660 passed the examiners. The percentage of failures was 19.1.

#### LONDON.

*British Hospital for Mothers and Babies.*—A. M. K. Orpen, M. Ward.

*Bury House and Elizabeth Garrett Anderson Hospital.*—J. M. Godfrey, M. Hughes, M. L. Hughes, W. M. Newbrook.

*City of London Maternity Hospital.*—A. M. Alexander, M. S. Andrews, F. C. Angell, K. I. Barnitt, J. M. Carruthers, D. Cooper, A. E. Draper, O. M. Francis, E. C. Juniper, A. Loveless, H. J. Miller, L. Millier, F. M. Muir, M. G. Neville, I. B. Paterson, E. M. Powell, M. A. Sergeant, E. Smith, A. A. Spice, E. E. Squire, J. D. I. Waugh, E. A. Willcox, E. Williams, A. Willson.

*Clapham Maternity Hospital.*—H. Barton, H. M. Borrer, A. Cockshott, B. R. Cullwick, G. Dance, S. M. Davies, D. L. Earl, A. M. H. Fell, K. M. Goodliffe, G. L. Hayward, S. Hood, I. M. Knight, H. MacWilliam, M. C. E. Trethowan, H. Walton, K. Wingrave.

*East End Mothers' Home.*—I. S. Aldous, A. E. A. Bishop, K. M. Carmody, M. Edwards, M. E. Edwards, E. J. Fraser, E. Greenwood, E. Heap, L. E. Henderson, E. S. King, E. G. Labey, A. M. Machell, E. Matthews, G. M. Palmer, C. Thornton.

*Edmonton Union Infirmary.*—E. Cole, K. A. Fyson, J. L. Vaux.

*Elizabeth Garrett Anderson Hospital.*—G. A. Allen, I. A. Dumbell, G. F. Parkinson.

*General Lying-in Hospital.*—A. C. Aspray, J. M. Brittain, K. M. Budgen, M. G. Burt, E. M. Doubleday, G. M. Fairhead, E. Gaskell, J. A. Gooden, F. M. Heany, C. C. Hillier, A. J. Hodge, M. Jones, C. B. Lovegrove, D. Newman, S. E. Nunn, F. E. Peyton, J. A. Pring, M. C. Reavley, C. M. M. Reeder, J. Roberts, L. K. Roberts, A. Winstone, M. Young.

*Greenwich Union Infirmary.*—M. B. Gillespie.

*Guy's Institution.*—V. M. Carroll, H. M. Collins, B. M. Dearman, D. J. Dudeney, M. H. Goddard, J. H. Howes, L. G. Mannell, E. J. Monsell, W. Russell.

*Hammersmith, Parkside Maternity Hospital.*—E. B. Welch.

*Ilford Council Maternity Home.*—L. Cromack, M. L. Wright.

*Jewish District Maternity Society.*—G. P. Asher.

*Lambeth Union Infirmary.*—H. M. Darch, W. M. Edgar, J. M. Linder.

*London Hospital.*—H. E. Cockrell, K. S. Cole, A. M. English, L. H. M. Fellingham, D. Hadley, D. E. Liley, V. A. Morley, J. W. Norton, H. B.

Singleton, A. Tall, H. J. Tuddenham, S. M. Whitehead.

*Maternity Nursing Association.*—A. O. Adcock, M. S. Fordyce, E. D. Grinstead, F. E. Holloway, E. C. Hunt, W. S. James, E. Kearney, H. M. R. Korte, C. C. Morley, M. M. Nave, E. M. Parkinson, A. E. Smith, E. J. G. Thomas.

*Middlesex Hospital.*—E. A. Browne, C. Butler, N. M. H. Clisby, M. A. Kewley, M. A. G. Scott, F. A. Stapleford, N. Wells.

*Plaistow Maternity Charity.*—E. Baker, J. Bancroft, A. Bibby, W. K. Bishop, E. Blamey, F. Bowen, J. M. Carter, P. Chambers, F. S. Clarke, E. H. Copley, F. M. B. Day, R. Dunn, F. M. Dymond, M. Evans, M. A. Fancy, E. M. Firth, A. M. Forsyth, F. E. Halliday, F. M. Harpin, E. M. Heugh, E. M. Hinde-Richardson, K. E. Ind, J. Jolly, M. I. Kirtton, E. I. Knowles, S. E. Larter, V. C. Lawes, E. M. A. Locke, D. M. Macdonald, S. W. Mattocks, M. L. Mock, E. M. Nelder, E. Owen, D. M. Pack, G. N. Prichard, E. M. Rann, J. Ridley, A. Roberts, F. H. Rooney, M. L. St. George, H. L. K. Shurben, E. Silver, E. J. Smith, E. Smith, M. Thomas, F. A. Warren, E. A. Wheatley, F. M. Wood, E. E. Woodcock.

*Queen Charlotte's Hospital.*—E. F. Ambler, B. M. Berridge, I. M. Comber, R. E. E. Comford, M. Davey, A. E. Edgely, F. E. Ellingham, G. M. Flack, D. E. Flannery, M. M. Fox, W. George, F. M. Hancock, B. Handy, E. Hunt, A. L. Hurn, F. M. M. Huxtable, R. M. Isaac, E. C. M. Jones, M. Kilner, F. M. Kirkby, A. M. Lansdown, E. Lavender, E. M. Laverick, D. Lee, E. D. Ling, S. McCann, J. N. Maxted, M. Milne, E. M. Nettleship, D. H. Parkyn, M. M. Pemberton, H. L. Phillips, E. Pike, R. M. Richardson, I. Search, V. D. Sellers, E. A. Shaw, A. M. Smith, L. M. Stratford, A. Tait, N. Taun, M. Taylor, C. Thomas, R. Vowler, E. J. Walther, F. S. Wattson, A. M. Webster, G. Wharton, A. E. Williams, G. N. E. Williams.

*Queen Mary's Hospital for the East End.*—F. E. Aris, J. G. M. Blackmore, E. E. G. Davies.

*Salvation Army Mothers' Hospital.*—G. Aston, C. Bamford, E. Blackburn, A. Clark, E. Harris, S. Paludan, R. Saunders, A. W. Smith.

*Shoreditch Union Infirmary.*—E. E. Kelly, M. T. Morgan.

*St. Bartholomew's Hospital.*—E. E. P. Campbell.

*St. Marylebone Workhouse Infirmary.*—G. E. Leveux, B. Marlow, E. M. Tamplin.

*St. Thomas' Hospital.*—K. T. Down, E. Dyer.

*University College Hospital.*—E. J. Browne, E. L. Clarke, M. G. Gill.

*Wandsworth Union Workhouse.*—A. Barbour, F. K. R. Harvey, E. E. Stanfield.

*West Ham Workhouse.*—L. L. Dillow, D. N. Neale, M. G. Sutherland, E. Teasdale.

*Whitechapel Union Infirmary.*—L. Corbett, M. Edwards.

(To be concluded.)

## CLAPHAM MATERNITY HOSPITAL.

### ANNUAL MEETING.

The Clapham Maternity Hospital held its 31st annual meeting on June 8th at the Hospital, Jeffreys Road, S.W. The patroness, the Marchioness of Dufferin and Ava, presided.

Dr. Annie McCall on inviting the Marchioness to occupy the chair, said that it was the first time that they had had the pleasure of her presence in that capacity. The Marchioness said that when she first received the invitation she had no doubt as to what her answer ought to be, and she felt that she must now take an active part instead of being a passive patroness. The reason that she was here for the first time in all these years was that she had been living in Ireland, but now she had come to reside in England.

She congratulated the Committee on their report, which was so admirably edited. She considered the contributory system the right one, as there were thousands unable to pay the expenses of a nursing home, and yet felt they ought not to avail themselves of free beds. This class of people were quite as worthy of help as any others. Miss Marion Ritchie, Treasurer, said that in reckoning the total of patients it must be remembered that with the exception of food the babies cost the hospital as much as the mothers, in many cases more.

The total expenses for the year amounted to £5,469 6s. 5d., and the total income amounted to £1,313. In spite of this they did not owe a brass farthing to anyone. The patients contributed according to their means; the nurses gave their work and the price of their food.

When, a short time since, they had to answer a Government enquiry as to the amount of their debts they were able to answer proudly that they only owed the tradesmen for food for the current week.

Mrs. Scharlieb spoke from the point of view of the birthrate and infant mortality. Owing to conditions due to the war, the babies for some years would be few and poor in quality. It would be a disaster for England if there were "more coffins than cradles." She emphasised strongly the need for mothers to nurse their infants, and said that in Whitechapel the infant mortality was lowest with the Jews, next to them the Irish, while it was highest among the children of the English, the reason being that the latter had largely given up nursing their babies.

Miss Alice Gregory said that her sympathies had always been chiefly with the mothers and that the preventible mortality among them had always seemed to her too terrible a thing to contemplate calmly. Every day eight or nine mothers die from the consequences of childbirth and many of these deaths need not have happened.

She spoke of the enormous strides surgery had made in the past seventy years. Why had not the care of the mother improved at the same rate? The deaths from puerperal sepsis were the same in

1916 as in 1860. The mothers of the nation had been ignored.

The work for some reason did not appeal largely to the educated classes. They took their C.M.B., as they would a certificate in music or drawing merely as an asset. Women would not undertake work that interfered with their week-end or with their nights in bed. She put this down partly to an extraordinary lack of imagination.

Dr. Annie McCall spoke of the good influence that was felt by the mothers during their fourteen days in the hospital; and how that she always impressed on the nurses and students that it was for them to see that every mother was better because she had been in the hospital. She deplored that the tendency of the age was for everyone to do only what he or she felt inclined to do. She lamented that the 50 beds at their disposal went no way towards their requirements, and she spoke of a possibility of having to turn the nurses out of their quarters in the adjoining house, and once more to convert them into wards.

At the conclusion of the meeting tea was served on the roof, and a goodly company of visitors and nurses did justice to the good things provided, while admiring the extensive view and enjoying the sunshine. But the grown-ups were not the only outdoor guests for infants in various stages of "newness" were getting sun baths in every available spot, and if they could have spoken they would no doubt have said: "Out of the everywhere into here! Well it might have been a great deal worse."

H. H.

### THE QUEEN AND THE BABIES.

On May 31st Her Majesty the Queen visited the City of London Maternity Hospital, City Road, E.C. and, after watching the weighing of the babies with much interest, gave great pleasure by herself placing one of the babies in the scale. On June 1st, Her Majesty also visited Queen Mary's Maternity Home, Cedar Lawn, Hampstead.

### QUEEN CHARLOTTE'S HOSPITAL.

Princess Arthur of Connaught attended the Special Appeal Meeting at the Marylebone Town Hall, on Tuesday last, when Major Sir Samuel Scott, Chairman of the Hospital, made a strong plea for financial support. Midwives and maternity nurses who are indebted to it for their excellent training, and the prestige which the name of Queen Charlotte's Hospital carries, can help greatly in furthering this appeal. We hope they will begin to do so forthwith.

### THE MARGARET CLUB.

The National Birth-Rate Commission, of which the Bishop of Birmingham is President, has recently advocated the establishment of hostels for unmarried mothers, and the Margaret Club and Day Nursery, 44, Amptill Square, N.W., which has already done excellent work for unmarried mothers and their children is appealing for £1,000 to start such a Club.

# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### HOW HIGHLY TRAINED NURSES CAN HELP THE GENERAL NURSING COUNCILS TO FOUND THE PROFESSION OF NURSING

Many of those nurses who have associated themselves together for a number of years to obtain an Act for the State Registration of Nurses—for the purpose of founding a Profession of Nursing on a sound educational and economic basis, for the benefit of the sick—realise that this great work cannot be accomplished in a day.

Those pioneers who have studied the history of the formation of professions realise that they gradually evolved through individual effort, and that, when the men who had promoted and formed them desired State organisation and protection for their work, they were invariably met by the determination of British Parliaments to protect the existing rights and privileges of those earning their living, by some means or other, in the various professions, although many of these had not attained to the standard of knowledge and efficiency which it was desired should be the hall-mark of those who, in the future, should be permitted to form the profession.

Thus, when the Medical, Dental and Midwives' Acts were placed on the Statute Book, a period of grace was provided, during which time those who had attained a minimum, instead of a maximum, of skill might be placed on these respective Registers.

Whether or no this policy is advisable is not the question. It is the policy of successive Governments, uninformed where standards of professional education and efficiency are concerned, and without this concession to British prejudice no profession has been conceded legal status and future rights of organisation by Act of Parliament.

Yet, with knowledge and patience upon the part of experts, immense progress and improvement is constantly taking place through the Medical, Dental and Midwives' Acts for the benefit of the community, and also of the registered members of those professions.

Now that the Nursing Acts are in force, no doubt the best trained nurses—those holding certificates of three years' training from our leading training schools—may wonder what benefit they will receive by placing their names on a Register with those of nurses having a less efficient training than their own.

### THE DUTY OF WELL-TRAINED NURSES.

We own to sympathy with these highly qualified women, but we venture to suggest to them that it is their professional duty to come forward and place their names on the Registers, and, in overwhelming numbers, form the electorate which is to build up a highly skilled profession of nursing in the future, when the term of grace will have expired, and progressively efficient standards of nursing education and examination will be in force. It is only by the support of the great body of highly trained certificated nurses that the General Nursing Councils can effect the necessary reforms, and, in the near future, the great profession of our dreams take concrete form.

### THE ADVANTAGES OF STATE REGISTRATION.

The most highly trained nurses must also realise that enrolment on the State Register gives them that legal status without which their work has, for so many years, remained exploitable, and without consideration, and that without the strong arm of the law, which forms nursing for the first time into a legalised profession, all their individual efforts for systematised education, a one portal examination, and recognition in Courts of Law (other than as domestic servants), are in vain. They re-

main, as heretofore, a mob of unrecognised workers, without status, privileges, or power.

We nurses of the past and present generations owe it as a duty to our colleagues of the future to weld ourselves together *en masse* as the solid foundation on which the splendid edifice of the Profession of Nursing shall arise.

Had not the work of the explorers and pioneers for this great nursing reform been persistently opposed, the organisation which we are attempting to-day would have been effected a quarter of a century ago.

#### THE REALISATION OF OUR ASPIRATIONS.

But, unlike many other pioneers, we have lived to see the realisation of our aspirations, and State Registration of Nurses by Act of Parliament an accomplished fact. Moreover, so much selfless devotion has been expended in the past, in securing the Nursing Acts, that we feel sure it will be forthcoming in the future to make them effective instruments in health reform, which has always been the aspiration of those who promoted the registration movement.

It is therefore with confidence that we ask every well-trained nurse to apply to the General Nursing Council for Registration when it announces that it is ready to receive applications, and thus share in the privilege of founding the great Profession of Nursing.

### MEDICAL MATTERS. THE NATION'S TEETH.

At the recent Conference on the Nation's Teeth, held at the Albert Hall, Manchester, convened by the Food Education Society, Danes Inn House, 265, Strand, W.C. 2, many interesting and important papers were presented.

#### THE EXTENT AND CONSEQUENCES OF DENTAL DISEASE.

Dr. Harry Campbell made a serious and startling indictment which no one disproved:

We have the worst teeth of any nation. The state of our teeth beggars description. It is a national disgrace which should excite a feeling of shame and humiliation.

Diseases of the teeth include: 1. Irregularities. 2. Loss from extraction and shedding. 3. Decay. 4. Disease at the fang-tips. 5. Pyorrhœa, or socket disease.

Regarding the extent of these among the British, dental irregularities are practically universal among us. Some hundred million teeth have been extracted. About the same number have been spontaneously shed. The decayed teeth number some two hundred million; there are about the same number of pyorrhœa sockets; finally there are some twenty million

diseased fang-tips. *At least nine-tenths of this disease is preventable.*

The consequence of dental diseases are:— (1) Malodorous breath. (2) Unsightliness (from irregularities, decay, long teeth). (3) Pain (toothache, pain inflicted by dentist, fear of dentist). (4) Reflex disturbances. (5) Defective mastication (causing indigestion). (6) Secondary local disease (abscess and cancer). (7) Blood poisoning (arthritis, neuritis). (8) Economic loss (loss of time; need of supplying army of dental surgeons).

#### THE CAUSE AND PREVENTION OF DENTAL CARIES.

Dr. J. Sim Wallace, D.Sc., stated that the cause of Dental Caries is the undue lodgment of certain carbohydrate foods generally in the crevices of *o*- between the teeth, when such food, or its situation, prevents the saliva washing through the fermenting mass or neutralizing the acid formed by micro-organisms.

Dental Caries can only be prevented by physiological means. These are—

(1) Mechanical (the motions of the jaws, tongue, lips and cheek), and the action of foods with certain physical qualities—*e.g.*, fibrillar or spongy foods.

(2) Chemico-physiological, resulting from the activity of the glands of oral hygiene (mucus and saliva).

When the physiological activity of the muscles of mastication, tongue, &c., and the physiological activity of the glands of oral hygiene are not interfered with or stultified by unphysiological foods, especially at the end of or between meals, dental caries does not occur.

#### THE EFFECT OF CERTAIN DIETETIC FACTORS ON THE DEVELOPMENT OF TEETH AND JAWS.

Mrs. May Mellanby declared that few will deny that changes in the diet are largely responsible for the appalling condition of the teeth of civilised man to-day. The question, however, that still remains to a great extent unanswered is, "What are the dietetic factors, the presence of which are responsible for the poor structure of the teeth of civilised man and for their liability to decay?"

In respect of the dental apparatus the diet must be considered from two aspects: (1) The part played by foodstuffs while still in the mouth: (2) The part played by these substances after absorption into the general circulation. The second of these aspects seems to be the more fundamental. That the first is also of importance cannot be denied, but she doubts whether this is so great as some think.

Mrs. Mellanby is of opinion that some substance, known as *vitamines* or accessory food factors, is of primary importance in the normal development and spacing of the teeth.



## NURSING ECHOES.

The Nursing World will apparently be very actively engaged next week.

On Monday the Royal British Nurses' Association holds its annual meeting at 11, Chandos Street, W., at three p.m.

The General Lying-in Hospital's Post Graduate week opens with tea at four p.m.

On Tuesday the Nursing and Midwifery Exhibition and Conference opens at noon at the Royal Horticultural Hall, Vincent Square, S.W., and continues for four days.

On Thursday the three days' Conference of the Incorporated Society of Trained Masseuses opens at the Mortimer Hall, Mortimer Street, W. On the same day an interesting gathering of "Old Nightingales" will be held at St. Thomas's Hospital, and the annual meeting of the Overseas Nursing Association takes place at Norfolk House, St. James's Square, by invitation of the Duchess of Norfolk, when H.R.H. Princess Beatrice, the patroness, will attend.

All the time the General Nursing Council goes steadily on with its important work.

Many nurses are enquiring if, and where, they can apply for admission to the State Register. We beg to assure them that directly the conditions under which applications will be received are decided and promulgated by the General Nursing Council, notification will be given in this JOURNAL. We, therefore, advise all nurses to watch these columns carefully.

The whole question of Army organisation is now under the consideration of the authorities, with the dual object of promoting efficiency and effecting economy. In the branch, in which the nursing profession is specially interested, that of military nursing, nothing would conduce more to efficiency than the granting of Rank to the members of the Nursing Services, both by attracting to these Services a sufficiency of the best nurses, and by securing to them the power to carry out the duties assigned to them, and to control the subordinate staff by right, not by favour. And because efficiency always makes for economy, Parliament would achieve both these objects by utilising this opportunity to grant Rank to nurses in Queen Alexandra's Imperial Military Nursing Service, and its Reserve, and the Territorial Force Nursing Service. The moment is opportune and the need urgent.

The Rev. Richard Wilson, of St. Augustine's Mission, Stepney, wants pennies for "treats"

for poor children and mothers. Treats mean getting out of Stepney, "a dry, hot-eyed place just now," and where people are very tired. This good vicar's sister has turned up from British Columbia after eleven years' absence, and she is carrying him off by sea to Scotland for a lovely change. She is evidently a very sensible person, who does not relish the idea of a "holiday" caravanning among fruit-pickers or "hopping." We don't believe, however, the devoted vicar of St. Augustine's will really enjoy rest of mind unless someone sends more pennies for his poor people left behind. Many nurses know of this fine mission work in the East End, and might perhaps bring it to the notice of friends with the "wherewithal." Don't forget that hundreds of little Huns are being pampered in our midst!

We heard recently of two life-long nurse friends who severed their friendship in two minutes, and it is not at all likely that they will resume it. One a comfortable stay-at-home, who had never even heard the crash of a bomb compared the conduct of our splendid martyrs at the front with that of the Hun. Number two, springing from her seat, exclaimed: "My God, what waste of glorious blood to keep safe and alive *old women like you!*" Then she whisked the dust off her shoes with a nice clean handkerchief and departed!

An interesting little ceremony took place last week in the Infirmary at Barnet, when the newly appointed Bishop of St. Albans, Dr. Furze, administered the Sacrament of Confirmation to two patients in their beds, one being an old woman of nearly eighty years of age.

At the conclusion the Bishop gave an appropriate address on courage and cheerfulness. He addressed his remarks to both nurses and patients. It was possible, he said, for Christian people to "keep smiling," in spite of the pains and sorrows in life, and it was the duty of everyone to contribute what they could towards creating a cheerful atmosphere. No one ought to wear a longer face than God had given them.

The ward was beautifully decorated with flowers, and a small portable altar stood between the beds of the two recipients of Confirmation.

The Bishop's genial and breezy personality was much appreciated by the sufferers, whose lives are necessarily set in a minor key, and everyone, both patients and nurses, were heartened by a handshake before he left the ward.

There is no doubt that "mothers' helps" are of great value to district nurses, and at the annual general meeting of the Reigate and Redhill District Nursing Association Dr. Thornton laid great stress on their usefulness, and asked if it would be possible to organise a supply in connection with the Association. He said the Borough Welfare Department, he believed, had four, and they went to houses where there had been a confinement or illness, and undertook the care of the household. From the medical point of view, it seemed to him almost as important as nursing, and a register of these women or some organisation by means of which householders could be supplied in this way during periods of sickness would add to the usefulness of the Association.

Never was the value of domestic work appreciated as it is now. It makes all the difference to comfort and healthy surroundings. Much more should be done, by those benefitted, to give honourable status to those skilled in household management, and the good care of children.

From all over the country County Nursing Associations deplore the shortage of nurses. Their system of short training and using certified midwives as nurses under a three-years' contract no longer appeals to conscientious women who wish to qualify for the Nursing Profession. We hope the General Nursing Council's influence when its rules are in force will do much to substitute a system of thoroughly trained and registered nurses (paid as such) for the rural poor, for the present insufficiently trained so-called "nurse-midwife."

The coroner at Egham commended Nurse Norton and an ex-officer for their attempt to save the life of a patient—also an ex-officer—who jumped through a window of a nursing home. Together they gripped the one leg until he wrenched himself free, and fell head first on the stones below, and killed himself. The verdict on the poor fellow was "Suicide whilst temporarily insane." To judge from such reports, which are frequent, these sufferers, to whom we should be eternally grateful, have never recovered from the terrible strain of the war.

Captain Ganzio Garibaldi and Captain D. Palazzoi, on behalf of Italian soldiers, placed a wreath last Saturday on the Nurse Cavell memorial in the presence of a large crowd, including representatives of the Italian colony in London. Captain Garibaldi and others made speeches.

## THE NATIONAL UNION OF TRAINED NURSES.

The House of the National Union of Trained Nurses, 46, Marsham Street, Westminster, S.W., looked charming on Tuesday afternoon last when Lady Rhondda opened the new club.

The ceremony was preceded by a strawberry tea, during which the members were able to observe and appreciate the transformation of their Lecture Room into a delightful and commodious Club Room, where they can, from 10 a.m. to 8 p.m., Sundays excepted, obtain light refreshments and enjoy their leisure hours. There is also on the same floor a small but charmingly furnished bedroom, opening out of the reading room, where silence is assured, and a second bedroom on the floor above. Members can be accommodated for a visit of a week's duration at a charge of 30s. for bed and breakfast; for the week-end for 12s. 6d., or for a single night 5s. The atmosphere of the Club Room is most restful and harmonious. The floor is covered with a crimson carpet with a surround of plain blue linoleum; blue curtains shade the windows, and a restful couch and easy chairs, with small tables at hand invite relaxation.

The President, Miss Helen Pearse, with Miss M. Rimmer, Hon. Organising Secretary, Miss N. Farrant, Hon. Secretary, and members of the Executive Committee, received the members and guests, and shortly after 5.30 an adjournment was made to the garden. Here Miss Farrant presented Lady Rhondda with a lovely sheaf of carnations, and Miss Pearse, from the chair, welcomed her to the Club, and read telegrams from Miss Eden and Miss Marsters regretting their absence and wishing it good luck. After Miss Cancellor had given a brief résumé of the history of the National Union of Trained Nurses, Lady Rhondda, in a few words, declared the club open and said that she was enormously impressed by the fascinating old house in which it was located. She hoped the Club would be a great success.

## THE PREVENTION OF VENEREAL DISEASE.

We regret that owing to similarity of title, we ascribed the work as reported at its first annual meeting, of the Society for the Prevention of Venereal Disease, to the National Council for Combating Venereal Diseases.

These two societies are both attempting to combat the ravages of Venereal Disease, but the Society for the Prevention of Venereal Disease strongly advocates the provision of means of immediate self-disinfection against venereal disease, to which the National Council is opposed; and is urging upon the Ministry of Health, and local authorities, to instruct chemists to sell such means of immediate self-disinfection as may be approved from time to time by the Ministry of Health, or Medical Officer of Health.

With this logical policy we confess ourselves in sympathy.

## IN LOVING MEMORY.

Nurses visiting Paris in the future will not fail to make a pilgrimage to the *terrasse* of the Jeu de Paume, in the Tuileries Gardens, to look on the beautiful bas-relief executed by M. Gabriel Pech, which was unveiled in honour of Edith Cavell last Saturday by M. Maginot, Minister of Pensions. He was accompanied by M. Steeg, the Belgian Ambassador, Sir George Grahame, representing the British Ambassador, General Pau, the American Military Attaché, and others.

lightly in the sky, waving a palm and scattering flowers upon the prostrate martyr. In the background burning ruins are suggested.

M. Stephane Lauzanne, editor of the *Matin*, which journal has given the monument to Paris, traced in glowing language the central incidents in the story of Miss Cavell. M. Maginot, for the French Government, glorified Nurse Cavell, who for him personified the sweet and great virtue of abnegation. Little children would spell out each page of her tragic history as they spelt out the sacrifice of Iphigenia and the agony of Saint Joan of Arc. To the splendour of the



Photo: "Daily Mail."

[Copyright.]

French Nurses laying a splendid floral tribute at the foot of the noble bas-relief Memorial to the late Edith Cavell, unveiled on June 12th at Paris.

Our only regret is that the British Government was not represented by a British nurse at this moving ceremony, in which the magnificent life and glorious death of one of our colleagues were extolled.

The monument is a fine work of art, and a worthy memorial, and represents Miss Cavell lying on the ground in her nurse's uniform, while the author of the murder is indicated by a German helmet. Above the recumbent body is an allegoric figure wrapped in graceful robes, floating

French martyr responded the sublime example of the British heroine. History would link their names for ever.

The ceremony closed with the recitation of a commemorative ode by Mme. Moreno, of the Comédie Française, and the placing of a tribute of flowers by French nurses, whose decorations showed that they too had served in the field.

Thus Paris possesses on an historic emplacement the image eternally living of one of Britain's noblest women.

## GUILD OF ST. BARNABAS FOR NURSES. ANNUAL FESTIVAL.

Following the precedent of "elder years," the forty-fifth anniversary of the Guild was marked, this year, on St. Barnabas' Day, with the same happy fusion of lavish hospitality, fruit, flowers and friendship. The festival of Tea (which is a comprehensive word, and means much more besides) spread itself over two hours, in the hall of the Church of the Holy Redeemer, Clerkenwell, where nurses kept dropping in as it suited their convenience, to partake of tea and coffee and multifarious cakes, to the tune of happy greetings and conversations informal and unrestrained. The special office for the anniversary was afterwards said in the church by the Chaplain-General the Rev. E. F. Russell, and the sermon—which must have greatly impressed the hearers—was preached by the Lord Bishop of Grahamstown. Taking his text from the Epistle for the day: *Then the disciples every, man according to his ability, determined to send relief unto the brethren which dwelt in Judæa, which also they did by the hands of Barnabas and Saul*, the Bishop emphasised the point that the office of intermediary or agent was one of the highest importance, because the Almighty always makes use of intermediaries when He desires to convey any kind of blessing. These human agents were the carriers of temporal blessings of great necessity. "Man in his completeness belongs entirely to God," and duties and responsibilities follow naturally upon the endowment of gifts. Pointing to the analogy of the nurse receiving the gifts of her training and her skill, the preacher remarked that they had been given for the *benefit of others*, and that if the powers bestowed were used primarily for the glory of God, the profession of nursing became a vocation.

Part III of the festival comprised the business meeting; not entirely grave, nor yet entirely gay, but containing the elements of both. This was held in the Finsbury Town Hall, which was packed with an audience of probably four or five hundred nurses. The pleasure felt by all at the sight of the Chaplain-General, recovered from his recent serious illness, and in his usual place in the chair, was marked by deafening applause; scarcely less was that which greeted the announcement that the Superior, Mrs. Gardner—affectionately known by the title she loves so well, the "Guild Mother,"—had been re-elected for a further term of three years. In a few well-chosen words she responded gracefully to her electors. Miss Wood's appearance on the platform was also warmly applauded.

The Bishop of Nyasaland spoke for a few minutes about the work of his diocese, and told how readily the Guild nurses always responded to his appeal for workers. He did not know what Miss Simpkin meant, but she had bid him ask the nurses to secure and send out gifts of B.I.P.

The popular Archdeacon of London did not fail us, which means that he did not cheat us out of the hearty laugh he always calls forth.

Taking for his text the well-worn word "Fusion" (non-political), he admirably moulded it to fit the life and needs of the members of the Guild. The right kind of fusion, he said, was that which knit the personal with the vocational, the womanhood of the nurse with her profession.

The meeting sent a message to Mr. Bell Cox, Chaplain of the Liverpool Branch, *Fidei Defensor*, who for the first time for many years was unable to be present.

The meeting terminated with the blessing pronounced by the Bishop of Nyasaland. The Bishop of Grahamstown was also on the platform.

B. K.

## THE BABIES' HOTEL.

On June 11th, Her Royal Highness Princess Christian formally opened the American Red Cross Babies' Home, and Training School for Children's Nurses, which is situated in Glebe Place, Stoke Newington. The Home has been running for a year, but from various causes the formal opening has been from time to time postponed. This is another venture for the relief of the professional classes. As the small inmates are drawn from that source alone, applications for admission are only entertained on the distinct understanding that the parent or parents of the children are from one cause or another unable to make a home for them. Some of the babies are the children of war widows who are obliged to earn their own living. Some of actors and actresses on tour, some are motherless and their fathers abroad, and so on. The charge for maintenance is on a sliding scale according to means, and the decision is made by a committee—the minimum £1 1s., and maximum £2 12s. 6d. The friends of course provide the clothes. These fees are not sufficient to meet expenses (as the accommodation is for eighteen only). It was hoped that the fees of the pupil nurses would cover the deficit. This however has not proved to be the case, as a sufficient number of pupils willing to pay for their training has not been forthcoming. The committee have therefore decided to give a free training with board and lodging, in return for work.

Each pupil has the entire charge, under trained supervision of two babies, for whom she has to do everything; and she has to take her turn every alternate fortnight in sleeping in the room with three or four of her little charges. She has to prepare their meals, wash their "woollies," play with them, and in fact learn and practise entire "baby craft."

A charming pair of old houses has been secured facing on to Clissold Park.

The day room of the tiny babies is panelled and distempered in pink, and in each panel some talented artist has painted in oils studies of animal life—bunny rabbits, cockadoodles, moo-cows, and many others of a nature to fascinate small folk. But all in vain were the cocks crowing

and the hens clucking on the afternoon of our visit, for the babies "to a man" were outside in the charming garden, lying in their Treasure Cots, or toddling around listening to real thrushes singing in the bushes. The dormitories contain at most four cots, with a bed for the pupil nurse on duty.

In the young babies' room the trained nurse and the Matron take it in turns to sleep. Everything is simple and plain and the cots are covered with pretty chintz, which in the case of the tinies is patterned with rose-buds.

The Home runs its own laundry, where anything, up to a thousand pieces, is turned out weekly. When one presently was introduced to the babies, this apparently large amount became understandable. In the kitchen the tea for the "toddlers" was being prepared by a pupil. On delightful crockery, with pictures of "puff-puffs," were spread dainty jam sandwiches, bread and butter, and sponge fingers. The art of preparing meals is evidently not overlooked in the training.

And then last, but not least, out in the two gardens were the babies themselves.

At the risk of being open to a charge of flattery, we say we have seldom or never seen a more charming collection of healthy and pretty children, or any more beautifully kept.

Dainty cambric frocks, spotless "woollies," bright heads, faultless finger nails, heaven reflected in their eyes (does the Matron advertise for blue-eyed babies?), brown faces, sturdy, firm limbs, each was sweeter than the last.

It was visiting day we chanced upon and here and there was an adoring mother making the most of limited time with her particular treasure.

Under the trees was a little child in a swing gurgling with delight as his particular nurse administered this form of enjoyment. In a pram was a small thing in a white suit with pockets new to greet the Princess.

Tea in the gardens on miniature tables with miniature chairs in position. Could anything be more attractive on a June afternoon? And if the mothers go away with an ache in their hearts, surely it must be alleviated by the thought of all the love and care with which their children are surrounded.

The Lady Superintendent, Mrs. Paull, is not a trained nurse, though she has had much experience with healthy children.

She thinks that healthy children should be treated from a health standpoint, and not from a sick nurse's point of view. A trained nurse is, however, always in residence in case of ailments, and a domestic science mistress comes in to give lectures to the pupils. Certainly under Mrs. Paull's care the children are blooming like the roses this month.

There is a "but" to everything, and it is the same "but" that applies to every institution nowadays—the Hostel wants funds.

A great opportunity to girls wishing to train as children's nurses is offered in this Home.

H. H.

## HONOURS FOR NURSES.

The King held an Investiture at Buckingham Palace on June 8th, and bestowed the following honours:—

### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE. OFFICERS.

Matron Edith Lyde, Queen Alexandra's Imperial Military Nursing Service.

#### THE ROYAL RED CROSS (FIRST CLASS).

Miss Emma Dodd, Territorial Force Nursing Service, and Sarah, Mrs. O'Keefe, British Red Cross Society.

#### THE ROYAL RED CROSS (SECOND CLASS).

Miss Nellie Thompson, Civil Nursing Service.  
Miss Helen Montfort, British Red Cross Society.  
Miss Enid Bazley, Miss Ermytrude de Trafford, and Miss Jeannette Gaydon, Voluntary Aid Detachment.

Miss Eliza Covey, South African Army Medical Corps.

#### THE MILITARY MEDAL.

Miss Marie McGrath, Queen Alexandra's Imperial Military Nursing Service Reserve, and Miss Katherine Lowe, Territorial Force Nursing Service.

His Majesty the King held an Investiture at Buckingham Palace on June 11th, when he bestowed the following Orders and Decorations.

### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE.

Commanders.—Military Division: Matron Jane Hoadley, Queen Alexandra's Imperial Military Nursing Service.

Officers.—Sister Elizabeth Macaulay, Queen Alexandra's Imperial Military Nursing Service; Miss Edith Appleton, Queen Alexandra's Imperial Military Nursing Service Reserve (also received the Royal Red Cross (First Class)).

#### THE ROYAL RED CROSS (FIRST CLASS).

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Elizabeth Baillie, Miss Marion Barwell, Miss Ida Brooke, and Miss Maud Plaskitt.

Territorial Force Nursing Service.—Miss Mary Bate, Miss Gertrude Bulman, Miss Annie Leech, and Miss Ada Peppier.

Civil Nursing Service.—Miss Margaret Macmillan.  
Voluntary Aid Detachment.—May, Mrs. MacWatters.

#### THE ROYAL RED CROSS (SECOND CLASS).

Queen Alexandra's Imperial Military Nursing Service.—Miss Lilian Newland and Miss Jane Young.

Queen Alexandra's Imperial Military Nursing Service Reserve.—Miss Mary Brown, Miss Jessie Morty, Miss Ada Murray, Miss Ann O'Donnell, Miss Daisy Perry, and Miss Evelyn Pike.

Territorial Force Nursing Service.—Miss Violet Beamish, Miss Lucy Bowman, Miss Beatrice Brayshaw, Miss Margaret Briggs, and Miss Annie Fishwick.

Civil Nursing Service.—Miss Julia Armstrong.

British Red Cross Society.—Maud, Mrs. Burridge, Miss Amelia Cargill, Miss Barbara Jefferys, Miss Sarah Norfield, Miss Alice Phillips, and Miss May Purdie.

Voluntary Aid Detachment.—Edith, Mrs. Faunce, Miss Rosamond Le Cocq, and Miss Daisy Russell.

#### THE MILITARY MEDAL.

Miss Beatrice Dascombe, Queen Alexandra's Imperial Military Nursing Service Reserve; Miss Maude De Guerin, Queen Alexandra's Imperial Military Nursing Service Reserve; Geneste, Mrs. Beeton, Queen Mary's Army Auxiliary Corps.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION

## LETTER FROM HER ROYAL HIGHNESS THE PRESIDENT.

The following letter has been received from H.R.H. the President, in acknowledgement of an expression of sympathy from the Executive Committee on the death of the Crown Princess of Sweden:—

78, PALL MALL,  
May 20th, 1920.

DEAR MRS. CAMPBELL THOMSON,—Many thanks for your kind letter conveying to me the message of sympathy from the Executive Committee and the Members of the Corporation on the death of my beloved niece the Crown Princess of Sweden. May I ask you to express to the Executive Committee and the Corporation my sincere gratitude for their sympathy, which I value greatly. My dear Association has never failed me in its kind interest and sympathy in my joys and sorrows.

Believe me, most sincerely yours,

HELENA,

*President of the Royal British Nurses' Association.*

## MILITARY MEDAL AWARD.

We are pleased to note that at the Investiture held on Tuesday, June 8th, Miss Katherine Robertson Lowe, M.R.B.N.A. received the Military Medal for conspicuous bravery. The report in connection with this particular award runs as follows:—

"For gallantry and devotion to duty when, during an air-raid, bombs destroyed a large portion of the ward in which she was on night duty, wounding and burying many of the patients. She continued to carry out her duties with great composure, and showed much resourcefulness in looking after the injured."

With a reserve characteristic of her northern nationality, Miss Lowe has little to say regarding the events which led up to the award but we gather that, for a fortnight previous to the bombing of the hospital, the town in which it was situated was heavily bombed and men, women and children were wounded. Early one morning a torpedo fell on the hospital, cutting in two the ward in which Miss Lowe and another military

sister were working. Many of the patients were actually buried in debris, although, ultimately, with one exception, all were saved. As the bombing proceeded, however, those in other parts of the hospital were less fortunate for we learn that two medical officers were killed and no less than seven nursing orderlies.

Her fellow members of the Royal British Nurses' Association warmly congratulate Miss Lowe on the acknowledgment at the hands of His Majesty of her courage and resourcefulness which saved many lives under her care.

## THE FIRST REGISTER OF TRAINED NURSES.

The Executive Committee, at its last meeting, came to the decision to close the Register of Trained Nurses, although the Membership Roll will, of course, be continued as before. Now that the State Register is about to be established, Registration under any authority other than the State will be valueless to the nurses, and the Committee consider that it would mislead both the nurses and the public if the Chartered Association continued to promote a Register. Henceforth, in the eyes of the law there will be only one official Register, and we close down an important part of the work of the Corporation with the consciousness that it is giving up a function which we have long desired should be undertaken by the State itself. Looking back to the first Register of Trained Nurses, that established by the Royal British Nurses' Association, we read the names of many who have helped forward the State Registration movement—women, who have with a long-range vision, seen that, although it would bring nothing for themselves, it offered the only means for laying solid foundations for just conditions of education, work and pay for the nurses of later generations. Many of those unselfish workers, whose names stand on our Register, have now passed to their rest, but the ideals which they had in view for the profession of nursing and its members, the ideals which led them to fight so strenuously for the recognition and protection of the trained nurses' qualification by the State, still exist, and without an organisation capable of taking action in the body politic we cannot hope to get within reach of such ideals.



Nurses, therefore, should not for one moment imagine that the work of their Association is ended. On the contrary, it is rather just beginning, for there are many rights and privileges due to members of one of the recognised professions which the Association will be able to promote or protect. It is only through a strong organisation that the nurses will be able to press for better conditions—an organisation in which there is no interference from unqualified people who know well how to buy and sell nursing labour, but know nothing or next to nothing about scientific nursing themselves. The evils existing in the profession will never be remedied until we are as strongly organised as are the medical profession, until every nurse is animated with some sort of feeling about the rudimentary elements of solidarity. When this feeling becomes general throughout the profession, the gain arising will not be only to the individual nurses, but to the nation at large. We, therefore, press our members, realising the powers for organisation which they possess, through their Royal Charter, to make their Association as widely known as possible, to speak of it to every nurse they know, and thus to build up, themselves, their own organisation for the protection of their profession and the advancement of their own interests. Three years' trained nurses only are admitted to membership of the Corporation, and scrutiny of the qualifications of those desirous of joining it will be as scrupulous as in the past, so that the general public will still continue to regard membership of the Corporation as the hall-mark of a very highly qualified nurse.

### MEETINGS.

Members are reminded that the Annual General Meeting of the Association takes place at 11, Chandos Street, Cavendish Square, on Monday, 21st inst., at 3 p.m.

We also desire to bring to their notice the meeting to be held this (Saturday) afternoon, when Miss Klaassen will speak on the "Organisation of Visiting and District Nursing."

### HAMPSTEAD COUNCIL OF SOCIAL WELFARE.

We have received from Mrs. Atherton Earp, M.R.B.N.A., Educational Organiser to the above Council, the Biennial Report for 1918 and 1919. The keynote of the Council's administrative work appears to have been an attempt to combine strict economy with a steady progress in reconstruction. The activities of the Council are evidently exceedingly varied and one can think of no branch of infant welfare work which does not find a place somewhere in its scheme. All kinds of lectures dealing with matters of importance to the mothers have been given, and Mrs. Earp appears to have been particularly energetic in this respect, for we constantly come across her name under very varied subject headings of lectures.

### OBITUARY.

#### MISS BRIDGET KELLY.

AN APPRECIATION FROM ONE OF HER OLD PROBATIONERS.

The nursing profession in Ireland has lost one of its great pioneers through the death of Miss Bridget Kelly, formerly Matron of Dr. Steevens' Hospital, Dublin. The sick poor of Dublin and that hospital owe a big debt of gratitude to her splendid organising and administrative powers. She received her certificate of general training from that hospital in 1886 and became its Matron three years later. She was a life Member of the R.B.N.A., a former member of its General Council and she always had a very deep interest in its work. Her last illness was a long and trying one and all her suffering was borne with a cheerful courage and hope that were the admiration of those among us who were privileged to be in touch with her during the last few months of her life. It was a matter of great happiness to her that she saw the cause of State Registration triumph before her death, for she was always enthusiastically in favour of this reform.

Miss Kelly was in every sense a large-minded, large-hearted Matron; one who was never content with less than our best, but there are others besides myself who feel that they owe to her their successful careers, and her memory will ever be held in strong affection and respect by the nurses whom she trained at Dr. Steevens' Hospital.

CECILIA LIDDIATT, M.R.B.N.A.

#### INSPECTOR-GENERAL MACLEAN, R.N.

It is with deep regret that we have to report the death of Inspector-General Maclean, R.N., who was a member of the General Council of the Corporation. General Maclean was the son of the Rev. Alexander Maclean, D.D., of Kiltarn, Ross-shire. He entered the Royal Navy as an assistant surgeon in 1862, having obtained his commission on August 14th of that year. He served first on Her Majesty's ships *Severn* and *Pantaloön*, and later on the *Challenger*, while on its voyage of scientific exploration round the world. After this he served on various ships and in naval hospitals. In 1883, he was awarded the Gilbert Blane Medal for Naval Officers, and was promoted to the rank of Fleet Surgeon and in 1898 to the rank of Inspector-General.

Dr. Maclean had a very varied career, indeed, and served in almost every part of the empire. One of his most treasured possessions was some beautiful old silver presented to him by H.R.H. the late Duke of Edinburgh. The late Inspector-General took a very close interest in the Association, and was keenly observant of the progress of the Central Committee's Bill last summer. Although very reserved, his quiet courtesy and kindness brought him a very large circle of friends, all of whom held in very high respect this very upright and "very perfect gentleman" of Her Late Majesty's Royal Navy.

ISABEL MACDONALD,  
Secretary to the Corporation.

10, Orchard Street, W.1

## THE HOSPITAL WORLD.

We must offer a word of sympathy to Lord Knutsford. "The London" has been the love of a life time, and after a quarter-of-a-century's devotion to its upkeep, it is indeed grievous to find its work cramped by the abnormal cost of every necessary which makes for a hospital's efficiency. How few of us realised that when the barbarians of Europe let loose the dogs of war their criminal attack on humanity would leave such a trail of disaster in its wake.

We are glad to see a generous, though no doubt quite inadequate response is being made to Lord Knutsford's appeal; but the voluntary hospital system cannot in its entirety be maintained under existing conditions and all interested in the prevention of disease, and the care of the sick, must come together, and help to evolve a system of management on a sound financial basis, which will meet modern needs. And through insurance the people must do much more to help themselves.

The Rockefeller Foundation, U.S.A., established by Mr. John D. Rockefeller "to promote the well being of mankind throughout the world," has offered to University College Hospital, and its Medical School, the munificent sum of £400,250 for building and endowment, and a further sum to University College for Medical Education and Research, bringing the total gift up to £1,205,000. It is part of the scheme that the Corporation of University College Hospital shall maintain 60 obstetric beds, and this will mean that the present Nurses' Home, which forms a wing of the hospital, will be utilised for the purposes of the hospital proper, and that a new Home will be provided for the nurses, let us hope with collegiate possibilities.

## THE PROFESSIONAL UNION OF TRAINED NURSES.

The Monthly meeting of the Public Health Section of the Professional Union of Trained Nurses, will be held at 17, Evelyn House, 62, Oxford Street, W.1., on Friday, June 25th, at 5.30 p.m.

Members please note!

## A CAUSE CÉLÈBRE.

Notice of trial has now been served and the action for libel set down brought by Miss Maude MacCallum against the late editor (Sir Henry Burdett) and the publishers and printers of the *Hospital*, and the *Nursing Mirror*, and it is presumed the action will be tried about the first week in July.

As the matter is one of much interest to the nursing profession, we learn that many nurses will be present to listen to the evidence.

## APPOINTMENTS.

### NURSE MATRON.

**Infectious Diseases Hospital, Spennymoor.**—Miss E. Cleminson has been appointed Nurse-Matron. She was trained at the Royal Infirmary, Edinburgh, and has been matron under the Hartlepool Port Sanitary Authority.

### SENIOR SISTER.

**Bulwell Infirmary, Highbury Road, Nottingham.**—Miss Jessie Woolford has been appointed Senior Sister. She was trained at the Blackburn Infirmary, where she subsequently held the position of Sister. She has had charge of the ambulance rooms at the Shell Factory, Hartlepool, and been Maternity Sister at the Maternity Hospital, Stockton-on-Tees. She is a certified midwife.

### INSPECTOR OF MIDWIVES.

**Montgomeryshire County Council.**—Miss Edith Rowlands has been appointed Inspector of Midwives. She was trained at the New Infirmary, Burnley, and has worked in Wales as a Queen's Nurse, and has been Assistant County Superintendent and School Nurse for East Sussex and Assistant Superintendent of the North Wales Nursing Association.

### SISTER.

**Fazakerley Sanatorium, Liverpool.**—Miss Margaret Ritchie has been appointed Sister. She was trained at the Manchester Royal Infirmary and King's Cross Fever Hospital, Dundee, and has acted as Sister in both institutions.

## NURSING REPRESENTATIVES ON THE COUNCIL OF THE Q.V.J. INSTITUTE.

Miss Grace H. Vaughan has been elected on to the Council Q.V.J.I., to represent the Superintendents of Training Homes in England, Wales and Ireland—the County Superintendents are represented by Miss Wheeley. Both these ladies are on the Executive Committee and on the Nursing Sub-Committee. The expert knowledge of the Superintendents' representatives should be invaluable to the Council, which is almost entirely a lay body.

## PRESENTATION TO STAFF-NURSE MINNIE BYRNE.

The Society for the Protection of Life from Fire has presented a gold watch to Staff-Nurse Minnie Byrne in recognition of her gallantry at the Northern General Military Hospital, Leeds, on January 1st. Nurse Byrne was administering an inhalation of oxygen to a patient when the cylinder exploded, setting fire to the bed. The nurse went through the flames and moved the patient to another bed, and in doing so set her own clothing on fire.

Recently Nurse Byrne, whose home is in Ireland, received the Royal Red Cross from the military authorities for the same gallant feat.

## EXAMINATIONS.

Examinations arranged by the Royal Sanitary Institute, 90, Buckingham Palace Road, London, S.W. 1, for Sanitary Officers and others will take place in London on July 30th and 31st next. Intending candidates should note that the Regulations for these examinations were revised in January last.

## THE NURSING AND MIDWIFERY EXHIBITION AND CONFERENCE.

The Nursing and Midwifery Exhibition will be held this year at the Royal Horticultural Hall, Westminster, S.W., from June 22nd to 25th, from 12 noon to 9 p.m. daily, and the Conference on June 23rd and 24th, opening at 2.30 p.m.

### THE EXHIBITION.

The Exhibition affords a means whereby nursing appliances, dietetic products, literature, and other exhibits of interest to nurses can be brought together and introduced to their notice. Amongst the leading firms who are exhibiting, we direct special attention to the following:—

### FIRST CLASS FIRMS IN THE EXHIBITION, STANDS NOT TO BE MISSED.

GENATOSAN, LTD., 12, Chenies Street, W.C. (Stand 2A).—The valuable specialities of this firm (who are the British purchasers of the Sanatogen Co.) are Sanatogen, the original tonic food, Formamin, the trustworthy mouth and throat disinfectant in tablet form, releasing nascent formaldehyde, and Genasprin, which a medical contemporary states, "possesses marked advantages over all other brands of aspirin."

E. T. MORRISS & CO., 139, Finchley Road, N.W. (Stand 13A) are showing the Marmet Baby Car, the many advantages of which must be seen to be fully appreciated.

SANAGEN CO., LTD., Sheepcote Lane, Battersea. (Stands 11 and 16A) will have, at its rose decorated stand, many features of special interest to nurses. An attractive offer made by this firm in connection with the Exhibition, is a gift of a week's free holiday at the palatial Redcliff Hotel, in the heart of the glorious Devon Riviera, for the Matron, Sister, and Nurse who send in the three best reports of the success following the use of Sanagen. Further information can be obtained at the Stand, or by post from the Sanagen Co., Ltd., Battersea, London, S.W.11.

J. G. INGRAM & CO., Hackney Wick, E.9. (Stand 25A).—The Ingram exhibit will comprise the high-class surgical rubber goods of this firm, including their "Eclipse" hot water bottles, seamless enema syringes, air cushions, etc., which nurses are cordially invited to examine.

BOOTS PURE DRUG CO., LTD., Station Road, Nottingham (Stands 37 and 38A) will have a comprehensive exhibit. It should be noted in connection with the larger branches of this firm that in their special surgical departments a feature of great usefulness is the attendance of a trained nurse.

BOVRIL, LTD., 152, Old Street, E.C. (Stand 39A).—Special notice should be taken by nurses and midwives of Invalid Bovril, which contains all the body building constituents of this well-known preparation, but is neither salted nor seasoned.

SOUTHALL BROS., Saltley, Birmingham (Stand 46A).—The exhibits of this firm are always most

attractively presented, while the excellence of their Accouchement Sets and other specialities are of world-wide repute.

HORLICK'S MALTED MILK, Slough, Bucks, England (Stands 53 and 54A, and 7B).—It is proved that all foods must contain certain essential products known as "Vitamines," as without them they would be valueless in promoting and sustaining healthy life. Horlick's Malted Milk answers the test of a complete food, for it contains the valuable nutrition of full cream milk, enriched with the nutritive extracts of best wheat and barley grains. Thus it contains the "Vitamines" of the cereals as well as of the milk. It is little wonder, therefore, that nurses rely on its staying power, and that it is a favourite beverage with them as well as with their patients.

MESSRS. ALLEN & HANBURYS, LTD., Bethnal Green, E. (Stands 1, 2, and 3B).—At this stand will be found the various Allenburys Dietetic Products, for which so many infants and invalids have reason to be grateful. The Allenburys "Milk Food," "Malted Food," "Diet," &c., are of world-wide repute, and their Pancreatised Milk Cocoa is both a food and a delightful beverage.

MESSRS. COLMAN & CO., Wincarnis Works, Norwich (Stand 6B).—This firm will display their Wine Tonic, Wincarnis, a scientific combination of choice wine, extract of meat, and extract of malt, which is frequently ordered in convalescence as a restorative tonic.

VIROL, LTD., 148-168, Old Street, London, E.C.1 (Stand 7B).—Virol is as our readers are aware, a scientific combination of foods rich in Vitamines. The nutritive value of Virol has been proved practically for many years in the feeding of infants and young children as well as adults. Since the recognition of the paramount importance of Vitamines has been scientifically proved, Virol, Ltd., stand out as the pioneers in the use of animal fats rich in Vitamines for children.

THE BRITISH JOURNAL OF NURSING (The Nursing Press, Ltd.), 431, Oxford Street, London, W.1 (Stand 29B).—As usual, THE BRITISH JOURNAL OF NURSING and other professional publications supplied through the Nursing Press, Ltd., will be in evidence. Do not forget that THE BRITISH JOURNAL OF NURSING (formerly the *Nursing Record*) is the only professionally-edited weekly Journal for nurses, and that it is the paper which for 32 years fought for and eventually won legal status for nurses. If you value your legal status you must logically value and support your Journal also. No doubt you do both.

SURGICAL MANUFACTURING CO., LTD., 83-85, Mortimer Street, London, W.1. (Stands 35 and 36B).—The many advantages offered to nurses and institutions by this firm will no doubt receive their careful consideration. As the name implies, the firm not only supplies, but manufactures invalid furniture, and is thus able to bring very expert knowledge to bear on its construction. A great advantage to many customers is the firm's practice of allowing Invalid Furniture to be had on hire in the first instance, and afterwards

purchased at the list price if paid for in the first month. Be sure to visit this firm at the Exhibition.

MEDICAL SUPPLY ASSOCIATION, 167-185, Gray's Inn Road, London, W.C.1. (Stands 43 and 44B).—Superintendents of nursing homes, and others, should not omit this opportunity of studying the merits of the "Ideal Steam Dressing Steriliser," specially designed for nursing homes, and which was awarded a gold medal at the last International Medical Congress.

#### ANNEXE A.

GLAXO. 155, Great Portland St., London, W.1.

A prominent feature of the Nursing Exhibition will be the Glaxo Cottage, which is again being erected in Annexe B, as in 1914. This cottage will be comfortably furnished by Barkers, as a rest room for nurses, where they can rest and meet their friends. The feature of the cottage will be a demonstration of the various ways in which Glaxo can be used, and nurses who are especially interested in the use of Glaxo in the dietary of children and invalids will have an opportunity of testing a variety of dishes. A cordial invitation is extended by the Glaxo Co. to all nurses attending the Exhibition.

#### ANNEXE B.

GAS LIGHT AND COKE CO.—The exhibits of the Gas Light and Coke Company always attract numbers of interested visitors; now, owing to the necessity of reducing coal fires to a minimum, the exhibit at the forthcoming Exhibition will be doubly attractive. The reason why a kitchen fire is kept constantly burning in summer time is to maintain a constant supply of hot water. But this can be had, day or night, if a gas Water Heater is installed, with the least possible labour. (a great consideration nowadays) and without the extravagance inseparable from keeping a kitchen range always going. Visit the Gas Light and Coke Co.'s Exhibit and see how it can be done.

#### THE NURSING CONFERENCE.

WEDNESDAY, JUNE 23RD.

The papers presented will include "Staffing Difficulties in Small Hospitals," by Miss H. P. Ind (Matron, Stratford-on-Avon Hospital); "The Future of Nursing and Living Out," by Frank Briant, Esq., J.P., M.P.; "Fever Nursing at Home and Abroad," by Dr. Jane Muller; "The Trained Nurse in Public Health Work," by Miss C. Margaret Alderman; "The Professional Union of Trained Nurses," by Miss E. Maude MacCallum; "The Necessity of Hospital Training for Mental Nurses," by Sir R. Armstrong Jones, M.D.; "Poor-Law Nursing," by Dr. J. C. Muir, and Miss A. C. Gibson.

#### THE MIDWIFERY CONFERENCE.

THURSDAY, JUNE 24TH.

The papers will include "Suggestions to Make Life Easier for the Practising Midwife," by Miss Elsie Hall; "Infant Welfare Work," by Miss E. F. Neville, Middlesex Hospital; "The Use and Abuse of Drugs in Midwifery," by Gordon Ley,

Esq., F.R.C.S.; "The Mother the Only Safe Environment for Young Babies," by Dr. Eric Pritchard; "Mothercraft and What it Comprises, as Taught by Dr. Truby King," by Miss M. Liddiard.

A feature of the Exhibition will be the maternity and gynæcological "Element" (Royal Free Hospital); sterilising drum, mask, and model dolls in uniform (South Kensington Nurses' Co-operation); appliances for disabled soldiers; charts relating to Public Health work from the Ministry of Health; cot, clothes, and breast feeding chart from the Mothercraft Training Society, etc.

### NAMES AND ADDRESSES TO NOTE AND REMEMBER.

MESSRS. GARROULD'S, Government and Hospital Contractors, 150 to 162, Edgware Road, London, W. 2.—Call and inspect their Nurses' Uniforms, Surgical Instruments, and Appliances, or write for Garrould's Nurses' Catalogue, which will be sent post free.

MESSRS. GAYLER & POPE, LTD., High Street, Marylebone, W. 1.—Do not forget that in addition to everything for Nurses' Uniforms, this firm caters for Nurses' Mufti. Coats and Skirts, Millinery and Underwear are obtainable at most reasonable prices.

BENGER'S FOOD, LTD., Otter Works, Manchester.—The special value of this farinaceous Food, in cases of critical illness, is that it contains natural digestive principles which become active as the food is being prepared with new milk. The degree of self-digestion can be regulated.

THE YORKSHIRE PEARL BARLEY MILLS, LTD., Pocklington, Yorkshire, which supplies "Fawcett's Natural Process Barley." Barley has a valuable place in the dietary of sick and well, and the above is prepared from bright, clean Yorkshire barley, with no added matter, and is beyond question pure.

#### THE NURSES' BOOKSHELVES.

Members of the Nursing Profession and certified Midwives who desire to keep their bookshelves well stocked with standard and up-to-date professional literature should note the following addresses:—

CHARLES GRIFFIN & Co., LTD., Exeter Street, Strand, the publishers of that favourite book with Nurses, "A Manual of Nursing," by Laurence Humphry, M.A., M.D., and many others of professional value.

H. K. LEWIS & Co., LTD., 136, Gower Street, W.C. 1.—Nurses should note that this firm are not only publishers of new books, but that they also have a large stock of secondhand books always available, and that they have a medical and scientific circulating library.

MESSRS. G. P. PUTNAM'S SONS, LTD., 24, Bedford Street, Strand, W.C. 2.—Messrs Putnam publish "A History of Nursing," by Lavinia L. Dock, R.N., and M. Adelaide Nutting, R.N., without which no nurses' library is complete, and other standard works.

## BOOK OF THE WEEK.

## A SCOTTISH NURSE AT WORK.\*

"So many people have written of their doings in the Great War that it seems as if there were nothing more to be said; but one whose opinion I value tells me that my experiences are in some ways unique as being so varied."

This introduction is Miss Henrietta Tayler's excuse for launching yet another war book.

She goes on to say:—

"Circumstances had prevented me from qualifying for admission to that finest of all services, the Q.A.I.M.N.S., or wearing the Territorial Nurses Badge . . . and therefore during all my nursing service I have had to bear the stigma of the semi-trained."

From a V.A.D. Hospital in the South of England, Miss Tayler was transferred to a similar post in the North of Scotland, from whence she got the coveted "move on" and had her first foreign experience in Dr. De-  
page's famous ambulance at La Panne, of which she gives an interesting account.

"Night duty was a wonderful experience, and I never got over a kind of mysterious thrill when two of us took up our twelve hours' vigil, not knowing whether we might sit peaceful and idle for an hour or two at intervals, or work without stopping until relieved. When the ambulance clattered up in the dark and the door was thrown open with the cry of "Blessés," the sleepy *brancardiers* would slowly bestir themselves—the very slowest was appropriately called Désiré—a hasty messenger would fetch our *médecin de garde*. We always had to remember their special idiosyncrasies (the doctors') and how *one* liked to have his attendant nurse to have everything prepared and to hand it without being asked, while another

would consider this a liberty, and if anything was offered to him for which he had not asked would stop and remark witheringly, "*Tiens, c'est l'infirmière qui fait le pansement.*" One of our own young surgeons, when he went back to take his turn in the trenches was brought in badly wounded and died with us.

"How I loved the work, and thanked Heaven daily for allowing my unworthy and half-trained self to do it, and then the interruption came.

I, who in more than thirty-five happy years had never been a day in bed, except to have measles, fell ill and did not realise it." Finally "I was ignominiously carried on a stretcher to the sick house, and lay in bed six long weeks with pneumonia. A civilian relation, who was sent for to see me, received from Belgian Headquarters a pass, authorising his presence "on the Front" for five days. If found there after that date he was to be shot at sight.

Instead of myself wielding the syringe I became a victim of three-hourly *piqûres* of *huile camphrée* with strychnine, caffeine, and other horrors during three weeks, till I felt like a pin-cushion, and though I have never been 'wounded,' yet I shall carry to the end of my life the scars gained on the Belgian Front."

On the evacuation of the hospital at La Panne, Miss Tayler obtained permission

from H.Q. to take service in connection with the Refugee Children at Adinkerke.

"My new home was a small wooden barrack, or two of them, somewhat reminiscent of glorified cowsheds planted on brick piles with a mud yard between. Here were gathered Belgian children of all ages from three months to twelve years.

"One twelve-year-old boy, a refugee from Armentières, always fled crying to me when the shelling began, and when told that he ought not to show more fear than the little ones, replied sadly, "*Mais ma sœur moi je sais, qu'après les obus, arrivent les chariots plein de blessés.*" He quaintly enough could only speak French, and therefore



SISTER AND SEFKE.

\* By Henrietta Tayler. John Lane, Bodley Head.

the little Flemings said he was a Boche, and would not play with him."

Miss Tayler was recalled from Adinkerke and received an order to proceed to Italy—"nurses, even half-trained ones who chanced to be able to speak Italian being somewhat rare, but the unexpected events in October, 1917, made it impossible for any Englishwoman to get leave to travel at all to Italy at that time," and so instead she was sent by the British Committee of the F.R.C. to a large new hospital for *repatriés* where the conditions appeared to be more than commonly trying, to judge from the parody on Kipling's "If," from which we quote one verse only:—

"If you can keep your head when all about you  
Are howling babies shrieking for their food.  
And keep your temper when the big ones flout you  
And find them jobs to do and keep them good!  
If you can dress a babe in Esmarch's Bandage  
And make pneumonia coats from scraps of wool,  
Can cut up twenty dinners with one penknife,  
And get them handed round while still just cool!

\* \* \* \* \*

If you can answer fifty different questions,  
And talk three languages with equal ease;  
If you are never tired and *never* grumble!

Then come out here and help the Refugees!"  
Many, many times in the cold winter nights did we have sad little processions through the snow to the small mortuary chapel. This "sad little procession" is shown by a pathetic illustration facing page 62.

Some of the Italian and French Red Cross ladies have had very little instruction, and the heroine of the following tale gaily told the incident to Miss Tayler:—

She was asked by the Examiner how she would treat a patient who had taken a heavy dose of poison. "I should make the sign of the Cross and go away as quickly as possible," she replied.

Miss Tayler seems to have an aptitude for languages, to which she partly owed her varied experiences.

"I have heard of globe trotters in peace time who boasted they could ask for hot water and clean towels in eleven different languages. I feel that after nursing the Allies one inevitably knows the words for pain, hunger, thirst, &c., and quite a useful handbook could be compiled not too large for anyone's pocket of the absolutely necessary hospital "shop" in the languages of *all* the belligerents." She gives many interesting incidents of her work in the French Ambulance in a little Italian town during the stress of the most terrible epidemic of Spanish influenza. From thence she went to work among the Austrian prisoners among the hills quite near the real mountains, Monte Pasubio, &c.

We have not space at our disposal to quote more from this interesting volume, and we do not pretend to have exhausted Miss Tayler's varied and enviable experiences.

We note with sorrow that one English Sister was supposed by a patient to "ave 'ad her training in a dog's 'ome."

H. H.

## COMING EVENTS.

*June 18th.*—National Union of Trained Nurses. Lecture. "Modern Nursing of Fevers," by Miss Stewart, A.R.R.C. Home Sister, South Western Hospital. 46, Marsham Street, S.W. 7 p.m.

*June 19th.*—Poor Law Infirmary Matrons' Association. Eustace Miles Restaurant. 5.30 p.m.

*June 19th.*—Royal British Nurses' Association. Address on "The Need for Nurses Engaged in Private Visiting Practice, and in District Nursing, to consider the Municipal Organization of Home Nursing," followed by discussion. Speaker, Miss H. G. Klaassen, 10 Orchard Street, Portman Square, W.1. 3 p.m.

*June 21st.*—Royal British Nurses' Association. Annual Meeting. 11, Chandos Street, Cavendish Square. 3 p.m.

*June 21st-25th.*—General Lying-in Hospital, York Road, Lambeth, S.E.1. Post Graduate Week for Midwives.

*June 22nd to 25th.*—Tenth Annual Nursing and Midwifery Exhibition and Conference, Royal Horticultural Hall, Westminster. Noon to 9 p.m.

*June 23rd.*—Central Midwives Board. Penal Cases. 10.30 a.m. Monthly Meeting.

*June 24th.*—Overseas Nursing Association. Annual Meeting. Norfolk House, St. James' Square, S.W. 1. H.R.H. Princess Beatrice will honour the meeting by being present. Chairman, the Right Hon. Viscount Gladstone. 3.30 p.m.

*June 24th, 25th and 26th.*—The Incorporated Society of Trained Masseuses. Annual Members' Conference. Mortimer Hall, Mortimer Street, London, W.

*June 24th.*—"Old Nightingales'" Annual Meeting. St. Thomas's Hospital, S.W.

*June 25th.*—Professional Union of Trained Nurses. Monthly Meeting Public Health Section. 17, Evelyn House, 62 Oxford Street, W.1. 5.30 p.m.

## A WORD FOR THE WEEK.

"DUTY.—This truth comes to us more and more the longer we live, that on what field or in what uniform or with what aims we do our duty matters very little, or even what our duty is, great or small, splendid or obscure. Only to find our duty certainly and somewhere, or somehow, to do it faithfully, makes us good, strong, happy and useful men, and tunes our lives into some feeble echo of the life of God."—*Phillips Brooks*.

"When anyone has offended me, I try to raise my soul so high that the offence cannot reach it."—*Descartes*.

## OUR ADVERTISERS.

Do not omit to buy, as far as possible, everything you need from "Our Advertisers" and to recommend them to your friends. They are all first-class firms.



## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## A VOICE FROM AFAR.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—To-day on a small island, in Lake Nyasa, I am reading the January papers, our latest news! I feel compelled to congratulate THE BRITISH JOURNAL OF NURSING and the League of St. Bartholomew's Hospital Nurses on the fact that at last we are to have State Registration of Nurses. Whenever I think of this, one personality fills my mind, that of Isla Stewart—R.I.P. How she would rejoice over this, for which she worked so hard in her leisure hours, which were very few. I can hear her voice now telling her nurses.

1. To hear both sides of the question.
2. To think the matter over carefully, and to decide for themselves whether they were for or against State Registration; and if in favour to do all in their power to further the cause.

I never met anyone who heard Miss Stewart's arguments, who was on the wrong side.

And I am proud to sign myself as

ONE OF HER SISTERS.

Likoma, Nyasaland,

April 15th, 1920.

## NURSING CONTINUOUS WORK.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—With reference to the assertion of Sir Lambert Ormsby as reported in the *Irish Times* of June 1st, to the effect that a nurse while on duty in her ward or in attendance on private patients "might be half her time on duty reading a book, writing a letter, or doing needlework," so long as she were within call of her patients; we venture to state that very few matrons would be satisfied to find a nurse reading a novel in her ward, unless perhaps, she were on night duty, when such a relaxation might sometimes be considered permissible.

Indeed, few nurses would dare even to sit down in the ward, unless it were to repair or make articles of ward equipment, or write a report. Moreover, any time during which a nurse is bound to be on duty, to attend a call or answer a bell, cannot be considered as rest time; and the very fact that she may be called upon to fill every minute, if necessary, with arduous work involving considerable mental strain as well as physical exertion, precludes the possibility of classing a nurse's hours of duty as any but "continuous work."

Emphatically we maintain that it is continuous work, and as continuous work it must be gauged and paid and recognised. Never have the advocates of an eight hour day for nurses placed them "on a par with the ordinary artisan or builder's labourer," because nurses, in their calling, combine the responsibilities of the manager with the fatigues of the labourer. The nurse, moreover,

though nominally on "time work," is, in reality, on "piece work," for her "jobs" must be accomplished, at whatever cost to herself. When work is heavy she must work overtime, or at an increased speed, for nothing can be neglected, and for what she cannot find time she must "make time." We feel confident that, in spite of the long silence in which members of the nursing profession have buried their convictions, every nurse can corroborate our view of this question from her own experience.

Yours faithfully,

M. MORTISHED, *Secretary.*

Irish Nurses' Union, Dublin.

## KERNELS FROM CORRESPONDENCE.

*Voluntary Worker*: "At a Red Cross meeting at Brighton we were recently told that V.A.D.s must be trained to do useful work for the civil population. They could do work in connection with the Ministry of Pensions, and now the V.A.D. charter had been enlarged they could work among the civil population in infant welfare centres, in dispensaries, in school clinics and invalid kitchens. Health visiting, too, would do much towards the prevention of disease."

Sir Arthur Stanley, Chairman of the Joint Committee of the Red Cross Society, said that it was impossible to say definitely in what form the energies of V.A.D.s would be most required now the war was over. They were only certain that they would be wanted. I for one left the meeting fully convinced that the time is past for voluntary work; it must take the bread out of somebody's mouth."

*Miss Sarah Brown, London*: "Every nurse will sympathise with the desire for purity and self-control advocated by Miss Marie V. Winters, but are we sure that the self-control maintained by fear of venereal disease is the result of "the highest ideals"? I do not think so. The man who has in his pocket the packet of prevention—and does not use it—is the stronger man. If immediate self-disinfection was alone for the benefit of those who are tempted and fall, one might hesitate to make it easy, but it is the appalling result and horrible injury to the innocent which results from communicating venereal disease that makes me an advocate (after much experience in treating these cases) of the necessity for immediate and effectual disinfection. To communicate venereal poison to a human being is, in my opinion, a crime; it must be treated as such and punished—or frail humanity be permitted to make itself immune."

## OUR PRIZE COMPETITIONS.

*June 19th.*—What do you know of hay fever, its causes and treatment?

*June 26th.*—Name all the diseases you know which may be disseminated by insect carriers, mentioning in each case the insect which is responsible, and stating how the infection is introduced into the human body.

*July 3rd.*—What are the causes of swelling of the legs (1) during pregnancy, (2) after labour? How would you deal with such cases?

# The Midwife.

## GENERAL LYING-IN HOSPITAL.

### EIGHTH ANNUAL POST-GRADUATE WEEK FOR MIDWIVES, JUNE 21st—25th (INCLUSIVE), 1920.

The following is the list of fixtures of Post-Graduate Week at the General Lying-in Hospital, York Road, Lambeth, S.E.

#### JUNE 21ST, MONDAY.

- 4 p.m.—Reception by Matron and Staff. Tea.
- 5 p.m.—Lecture by Dr. Fairbairn, "Preventive Medicine in Relation to Midwifery."

#### JUNE 22ND, TUESDAY.

- 11 a.m.—Clinic in the Wards, conducted by the House Physician.
- 2 p.m.—Meet at the Hospital: York Road Infants' Clinic, or visit Queen Charlotte's Hospital or the Royal College of Surgeons.
- 6 p.m.—Lecture by Dr. Eardley Holland, "Injuries to the Fœtal Head during Labour."

#### JUNE 23RD, WEDNESDAY.

- 11 a.m.—Clinic in the Wards on "The Baby," conducted by the Ward Sisters.
- 3 p.m.—Clinical Lecture by Dr. Stebbing at Lambeth Infirmary.
- 5 p.m.—Lecture to Pupil Midwives by Dr. Fairbairn.
- 6 p.m.—Clinic on Abnormal Cases by Dr. Fairbairn.

#### JUNE 24TH, THURSDAY.

- 11 a.m.—Demonstration on the preparation of Artificial Feeds, &c.  
Demonstration in the Lecture Hall on the preparation for Obstetrical Surgery, Induction of Labour, &c.
- 2 p.m.—Visits to Burroughs Wellcome Museum, City Road Hospital, Sanitary Institute.
- 6 p.m.—Lecture by Dr. Eric Pritchard, "The Difficulties and Management of Weaning."

#### JUNE 25TH, FRIDAY.

- 11 a.m.—Demonstrations in Milk Kitchen and Lecture Hall.
- 2 p.m.—York Road Infants' Clinic.
- 3 p.m.—Lecture by Lady Barrett, "Diet in Pregnancy and the Puerperium."
- 5 p.m.—Test Paper (optional) Prizes given.
- 7.30 p.m.—Lecture at Midwives Institute (Tickets 6d. each). Subject and Lecturer to be announced later.

Ante-Natal Clinic daily, 9 a.m. (numbers limited). Subscription for Course, 6s. Those who wish to join are requested to send in their names as soon as possible to Sister K. V. Coni, Hon. Secretary.

## ROBINSON'S "PATENT" BARLEY.

It is of the highest importance when infants are hand-fed to use a suitable diluent for cow's milk, no matter whether fresh, dried, or condensed. Nothing is better for this purpose than Robinson's "Patent" Barley, which has an established reputation of nearly 100 years to its credit. It is supplied by J. & J. Colman, Ltd., Norwich.

## CENTRAL MIDWIVES BOARD.

### SUCCESSFUL CANDIDATES AT MAY EXAM.

(Continued from page 351.)

#### PRIVATE TUITION.

O. M. E. Beadle, F. J. Calvert, E. Campbell, B. E. Charles, I. Charlton, H. Clough, A. Davies, J. C. Davies, L. A. Davies, C. Dutton, M. J. Gameson, I. Gelderd-Somervell, A. M. Gough, C. Graham, E. Harrington, D. I. Harris, E. Herington, E. M. Henshall, A. L. Jenkins, M. Johnson, E. E. Jones, E. Jones, M. Kennedy, E. Kenyon, M. Letheren, B. Lewis, M. L. McKenzie, M. Martindale, A. I. Moore, H. D. Morris, E. Paul, L. J. Pearce, D. M. J. Phillips, R. N. Price, E. A. Sanger, M. Smith, L. M. Spence, N. B. Spence, F. D. W. Stock.

#### PRIVATE TUITION AND INSTITUTIONS.

*St. Mary's Hospital, Manchester.*—B. Almond, C. C. Armishaw, G. Coxon, N. Doyle, E. Fairclough, M. A. Ogden, M. Walshe. *The Lady Holland Maternity Home.*—H. F. Barry, D. M. West, E. S. Williams. *General Lying-in Hospital.*—N. Bellett, E. G. French, G. Jones, M. E. Payne, A. B. Wardle. *Nottingham Workhouse Infirmary.*—M. A. Brindley, E. Whalley. *Liverpool Maternity Hospital.*—E. Egan. *Jewish District Maternity Society.*—S. Katz. *Kensington Union Infirmary.*—F. L. Maddison, M. E. Stewart. *Birmingham Maternity Hospital.*—J. Anderton, M. A. N. Mason, R. Milward. *Fulham Midwifery School.*—D. Moore, M. Yates. *East End Mothers' Home.*—L. Pelegshörl. *Ormond House, Chelsea.*—C. E. Pine, A. Plummer. *Pemberton Nursing Institute.*—E. Adams, M. C. Soar, A. A. Stay, M. J. White. *Lock Hospital.*—M. Urwin. *Greenwich Union Infirmary.*—A. Garton. *Monmouthshire Nursing Association.*—M. Vaughan.

(To be concluded.)

## SUGAR FOR CHILD WELFARE CENTRES.

The Ministry of Health, after consultation with the Ministry of Food, announces that whereas under the present system an extra ration of 4 ounces of sugar can only be obtained for children between the ages of six and eighteen months attending Centres who are certified to be in need of an additional supply, under the new procedure the extra ration can be obtained for all children under two years of age who may be certified to be in need of an additional supply of sugar. The certificate may be issued by the Medical Officer or the Superintendent of the Centre, as is done under the present arrangements, or by a duly qualified Medical Practitioner, and should then be sent to the local Food Office for the necessary permit to be issued granting the extra ration, which can then be purchased direct from a retailer instead of through a Centre as at present.

# THE BRITISH JOURNAL OF NURSING

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Vol. LXIV

## EDITORIAL.

### THE VICTORIA CROSS—

#### "FOR CONSPICUOUS ACTS OF BRAVERY."

The little bronze cross, of no great intrinsic value, bearing the words "For Valour"—instituted by Queen Victoria on January 29th, 1856 as the decoration of the Victoria Cross—is probably more coveted than any other; for it indicates that the wearer showed conspicuous bravery, initiative and resourcefulness—"where valiant men were all"—under circumstances of extreme peril. So far it has only been awarded to men, but the recent war has proved beyond question that women are capable, not only of enduring danger unflinchingly and heroically, but of voluntarily assuming responsibilities which involve exposure to, and disregard of, great dangers, from motives of patriotism, or in order to save life.

Prior to the South African war, the Royal Red Cross was regarded as the Nurses' Victoria Cross. It, also, was instituted by Queen Victoria, on St. George's Day, 1883, "For zeal and devotion in providing for, and nursing, sick and wounded sailors, soldiers, and others with the Army in the field, on board ship, or in hospitals." It was only rarely awarded, and conferred real and well-merited distinction on its possessor. The South African war to some extent, and the Great War still more, cheapened the value of this decoration, both by the institution of a second grade, and also because its possession does not, at present, necessarily imply initiative, resourcefulness, or special bravery. Probationers, and V.A.D.s who had served a few months in a military or civilian hospital where wounded sailors and soldiers were received, were eligible for, and in many instances received, this decoration, as well as many Matrons, Sisters and Nurses who, while doing admirable and valuable work for the sick

and wounded, performed it under quite ordinary conditions.

His Majesty the King has now interpreted the feeling of the Nation by establishing new rules to govern the conferring of the Victoria Cross, and, in an Order published in the *London Gazette* of June 18th, it is ordained that amongst those eligible to receive this coveted decoration are:—"Matrons, Sisters, Nurses, and the Staff of the Nursing Services and other Services pertaining to hospitals and nursing, and civilians of either sex serving regularly, or temporarily, under the orders, direction, or supervision of any of His Majesty's forces."

The decoration has previously been awarded "for conspicuous acts of bravery"; now it may also be gained by "some daring or pre-eminent act of valour or self-sacrifice, or extreme devotion to duty, in the presence of the enemy."

When a deed of valour is performed by a body of sailors, soldiers or airmen, it will be open to them to select one or more of their number, by secret ballot, for the V.C. If the same regulation were enforced in regard to the award of the V.C. to members of the Nursing Profession under similar conditions, it would afford the best guarantee of a right selection under difficult circumstances. To be selected by one's peers, under such conditions would be an honour to be worn modestly, but proudly, by a nurse all her life long.

In the name of the Profession of Nursing we beg to offer to His Majesty the King its loyal and dutiful thanks for the great honour he has conferred upon it in making its members eligible for the Victoria Cross, and in the recognition of the value of their work that such an honour implies. It should stimulate every member of the Profession to walk worthy of the vocation wherewith she is called.

## OUR PRIZE COMPETITION.

### WHAT DO YOU KNOW OF HAY FEVER, ITS CAUSES AND TREATMENT?

We have pleasure in awarding the prize this week to Miss Dorothy Jean, University College Hospital, Gower Street, W.C.

#### PRIZE PAPER.

*Cause.*—Hay-fever is an affection of the upper air-passages, often associated with asthmatic attacks, due to irritation of the mucous membrane by the ripe pollen of certain grasses and plants, which is carried about in the air, especially during the months of May, June and July.

There are two forms—the “June cold” or “rose cold,” which comes on in the spring, and the autumnal form, which in the United States comes on in August and September, but never persists after a severe frost. It is more common in Great Britain and America than on the Continent.

The disposition of the disease is hereditary, and women are more subject to it than men; the tendency lessens as age advances. It has been discovered that the pollen of rye is the most active cause, and has the greatest effect on the hyper-sensitive mucous membrane.

*Symptoms.*—These are, in a majority of cases, very like those of ordinary coryza; there may, however, be much more headache and distress, and some patients become very low-spirited. The symptoms include:—

- (1) Coryza or continual running of the eyes and nose,
- (2) Attacks of continual sneezing,
- (3) Frequent headaches,
- (4) Cough, a common symptom, and may be very distressing,
- (5) Paroxysms of asthma may occur,
- (6) General depression and lack of energy,
- (7) A great deal of irritation of eyes and nose,
- (8) Inflammation of the conjunctive membrane, causing the eyes to be bloodshot.

#### *Treatment.*

(1) Inoculation some few times before the hay-fever period occurs each year, and repeated every four or five days, is sometimes beneficial, and with some cases almost effects a cure.

(2) Nose sprays of menthol, formalin, eucalyptus, sometimes gives relief.

(3) Cauterisation of the mucous membrane of the nose, or sometimes removal of the turbinal bones.

(4) Application of adrenalin and cocaine.

(5) Remedies to improve the stability of the nervous system, such as arsenic, phosphorus and strychnia.

(6) Change of climate—the disease is aggravated by residence in agricultural districts. The dry mountain air is best, or sometimes the seaside.

(7) Application to the eye every morning, a few minutes before rising, of a few drops of Dunbar's antitoxin will in many cases prevent attacks.

(8) Coll. alk. for sniffing up the nose.

Persons suffering from hay-fever should avoid over-tiring themselves, take as much rest as possible, eat nourishing food, as the body needs strengthening, and keep the bowels well moved, taking aperients whenever necessary. Care should be taken also not to throw off too much clothing, even if the weather is very warm, as chills, in that condition, are liable to be easily taken. Hay-fever is never a fatal disease, or never in any way dangerous, but, during the period it lasts, most unpleasant and irritating.

The inoculation treatment appears to give as much relief as any, and the serum which is injected is prepared from the pollen of flowers.

The condition can only be relieved, as no known treatment at present can absolutely produce immunity from the disease.

Dust and sun have a very bad effect on some people, and will bring on a bad attack, with the usual symptoms of coughing and sneezing, and great irritation and general discomfort.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss W. Appleton, Miss F. Sheppard, Miss M. Baines, Miss J. Evans, Miss P. Thompson.

Miss F. Sheppard writes:—“If the eyes are affected, weak boracic lotion applied from a glass eye bath for the purpose is of value. The constitutional treatment consists in a liberal diet, as it is a very exhausting complaint from the constant sneezing and irritation. Attention to the bowels and skin, with a nervine tonic. If circumstances permit, a change of residence to the seaside, or preferably a sea voyage, where the prevailing winds are from the sea, not the land.”

#### QUESTION FOR NEXT WEEK.

Name all the diseases you know which may be disseminated by insect carriers, mentioning in each case the insect which is responsible, and stating how the infection is introduced into the human body.

## NURSING ECHOES.

The position of Registrar to the General Nursing Council for England and Wales has been eagerly sought by a large number of candidates. The decision to appoint a well-trained and experienced nurse has given universal satisfaction throughout the profession.

As we go to press the opening ceremony of the extension of the Nurses' Cottage at Honor Oak Park, kept up by the Guy's Hospital Past and Present Nurses' League, is taking place. This cottage is a delightful place, where Guy's Nurses enjoy perfect rest and recreation, and **has**, we have no doubt, done wonders in maintaining their health and spirits.

Upon the initiative of an active promoter of "good things" for nurses, Sir Samuel Hoare, member for Chelsea, recently asked the following question in the House of Commons:—"Whether any decision has now been arrived at upon the question of the issue of a medal for nurses who served in Base Military Hospitals in the United Kingdom during the war, and who did not have the opportunity of serving overseas."

Mr. Churchill replied: "The question of the award of a medal for service at home during the war will receive further consideration as soon as the preparation and issue of the war medal is more advanced."

All hope of justice, in this particular, for those who exercised self-denial in remaining at home, when others with more influence were preferred before them for foreign service, need not, therefore, be abandoned. We know our

War Office. To keep on agitating is the only policy.

Twenty-four nurses, forming the third unit of the British Committee of the Russian Red Cross Society, were inspected by H.R.H. Princess Christian, Chairman of the Committee, at the headquarters, 37, Albemarle Street,

W.1., prior to leaving Liverpool on June 22nd for Constantinople. From there they will go to the Isle of Lemnos, the principal base for the relief of Russian refugees in the Near East. The majority of the nurses forming the unit have already had experience of war service.

The Committee is doing most useful work amongst the Russian refugees, and has established a number of centres from which relief is distributed in Northern and Southern Europe, as well as Egypt. The nurses will find plenty of work to be done, for destitution and distress always bring in their wake sickness, suffering and disease. It is one of the joys of a nurse's life to be able to alleviate these conditions, and we congratulate the members of the Mission on their selection for this work for the relief of suffering humanity.



A MEMBER OF THE VICTORIAN ORDER OF NURSES FOR CANADA.

tendent, Victorian Order of Nurses, Vancouver, the first number of V.O.N., the Official Organ of the Order, which is admirably produced and contains much interesting information. It should prove a welcome link between the widely scattered nurses of the Order. The frontispiece is an excellent picture of a Nurse of the Victorian Order, here reproduced.

We have received from Miss Ina Maule Cole, District Superin-

Under the heading "Wayside Tales," a pleasant little story is told:—

"Public Health Work is often an uphill climb. Discouragements come thick and fast at times, and it takes considerable pluck, faith and vision to keep going, and waiting for the occasional encouragement that does come, usually from almost unexpected quarters.

"In Halifax a little incident occurred lately which goes to show that it is all worth the effort. A mother in very ordinary circumstances, being outside the city limits, came into town to be cared for by the Victorian Order. She left two little children at home in care of their daddy, the oldest not over five years of age. The five-year-old and the three-year-old had for some time been saving their pennies until between them they had amassed two dollars—all in coppers. The V.O.N.s received a little package, and a tiny note, and when they opened it they found these two hundred pennies which the note said were to be given to 'The nurse who took care of mamma and the new baby.' The nurse forgot all about cold nights, long walks, overwork, and felt that she had been amply repaid, and that baby is likely to be a 'Better Baby' because he is so welcome in the family."

We regret to note that at the annual meeting of the Birmingham District Nursing Association, Mrs. Beal, who has been a member of the committee for forty years, spoke in a minor key. She said: "They had often been in tight places, but never had they met with so many difficulties as they had to encounter now. Those difficulties were such that the courage of their devoted superintendents was strained almost to breaking point. She often thought the public did not know the position held by the district nurses in the city, and what it would mean to the suffering poor if they were withdrawn. Those who had had trained nurses in their own homes knew what it meant to the patient and the latter's friends to have a skilful trained woman in attendance. If that was of such importance in those homes, where there were so many alleviations, what must it mean in the homes of the poor, where ignorance and prejudice prevailed and where there were not even the slightest essentials for nursing? Very often, when a nurse arrived to attend a case, she had to send back to the Home for a bed and the elementary appliances for nursing. The society began with one nurse in one district, and gradually increased the number, and in the days of its prosperity had the satisfaction of knowing there was a nurse in every district, when the old boundaries prevailed. Now there

were four districts in which they had no nurses; and no money to pay them with if they had the nurses. The society did not know what to do, but if it did not receive some fat donations it was in danger of having to close down. Perhaps the city would then realise the value of these nurses. The outlook was exceedingly black."

This appears a grave reflection on the generosity of a city so wealthy as Birmingham, and surely the industrial classes, now so highly paid, should hand a bit on, in support of work so excellent. The good district nurse is a pearl of great price.

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The late Mr. Nathaniel P. Blaker, of Cheriton, Sussex, bequeathed an annuity of £300 to his nurse, Miss Ethel Caroline Parker, "who has nursed me with the greatest care, and I attribute my recovery in no small degree to her great care and attention."

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There is sure to be a big muster of nurses trained at the Hendon Infirmary (now the Colindale Hospital) on July 2nd, for the unveiling in the Nurses' Home of the Memorial to members of the nursing staff. This unveiling ceremony is to be followed by tea, and then the League Meeting is to be held. It will be a very special meeting, for it was originally convened for the end of March, and was postponed on account of the very serious illness of its much-loved President, Miss Elma Smith, who is now, happily, on the high road to recovery.

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## PROFESSIONAL UNION OF TRAINED NURSES, GLASGOW.

The first Quarterly Meeting of members of the above Union was held on Friday, June 18th.

By request the members agreed to open the first part of the meeting to nurses interested in the activities of the Union, in order to give non-members an opportunity of getting information and joining in discussion. The Secretary gave a short address, and drew attention to the work the Union was undertaking, and the progress already achieved in various directions. The discussion which followed shows that nurses are taking an energetic interest in their own affairs. The Chairman then asked non-members to retire, all of whom applied to join the Union before leaving. The Secretary then read the quarterly report and the members expressed their satisfaction with the progress that had been made in the short time. The membership is increasing every week.



## THE COLLEGE OF NURSING, LTD.

### THE ANNUAL MEETING.

The Annual Meeting of the College of Nursing, Ltd., was held at the House of the Royal Society of Medicine on Thursday, June 17th, at 3 p.m., the Chairman of the Company, the Hon. Sir Arthur Stanley, presided, and proposed that the Report and Accounts which were in the hands of the meeting should be received and adopted.

Sir Arthur Stanley said that last year was one of the greatest possible importance not only to the College of Nursing but also to the Nursing profession generally, as 1919 saw the Act for the State Registration of Nurses placed upon the Statute Book. The College had set itself to build up a membership of 20,000 so as to strengthen the force behind the Registration movement, but "it came" before they had got that number. It was representative not only of individual nurses but also of the great training schools. He then dealt in detail with the activities of the College.

In regard to finance, which was the bedrock of success "we," said Sir Arthur, "established the Nation's Fund for Nurses to meet two needs—to provide an Endowment Fund for the College of Nursing, and a Tribute Fund for necessitous nurses in sickness, distress and old age, who were not able to follow their profession." They aimed at £100,000, bringing in an income of £5,000 a year, and, thanks to generous subscriptions, they had reached a sum not very far short of that amount.

They were prepared for very heavy demands upon the Tribute Fund, but not for so many as they had. At the end of the financial year the sum stood at £56,783, and without disclosing secrets he might say that, thanks to generous donors, the figure now showed an increase of not much less than £30,000.

But there was the other side. The expenditure had exceeded the income by £782.

The Register last year had cost them that amount, and the *Bulletin* £270. Thus they had had exceptional expenses. On the other hand, he had never known a society which did not have exceptional expenses annually.

Referring to the foundation of the various College Centres and to the fact that the nurses themselves had found something over £51,000, Sir Arthur said that here indeed was a token that the great nursing profession had found itself at last.

Mrs. J. M. Jones said that she belonged to several societies and each had an annual subscription. She asked how the College proposed to go on living? There was the cost of living, and the cost of salaries, and it had been asked why they were trying to raise the salaries of nurses and yet paid their own officials so badly. They had advertised for an Organising Secretary at £200 a year, and everyone knew that no woman could, in these days, possibly live on that sum. She begged to propose that members should pay an annual subscription.

Miss Burgess considered that new members should pay a subscription of 5s. per annum.

The Chairman said that the Report and Accounts should now be adopted and then this question could be discussed. This having been done, he asked for an expression of opinion on the question of an annual subscription. It was only fair that those who came in now that the College was an established thing should contribute something.

A member expressed the opinion that nurses would be unable to pay five shillings a year as well as the initial fee of £1 1s.

The Chairman said that whatever was now passed could not be forced upon existing members. If they chose to pay a subscription the Council would be glad to receive it. All they could do now was to advise the Council that steps should be taken to alter the Articles of Association so as to enable an annual subscription to be paid.

Mrs. Jones considered it vital that an annual subscription should be paid.

It was agreed that the question should be referred to the Council for consideration and report.

Dame Sidney Browne here took the chair, and Miss Rundle announced the result of the ballot for election of members to the Council in place of those retiring in rotation, and being eligible for re-election. They were:—

#### ENGLAND AND WALES.

Sir Arthur Stanley, Miss Sparshott, Miss Lloyd-Still, Dr. Jane Walker, Mr. Russell Howard, Lord Knutsford, Miss E. M. Wyatt (Queen's Nurse), Miss Louisa K. Bowden (School Nurse).

#### SCOTLAND.

Miss Calder, Miss Turnbull.

#### IRELAND.

Dr. George Peacocke, Miss Annie Michie.

The new members are Mr. Russell Howard, Lord Knutsford, Miss Wyatt, Queen's Nurse, Ramsgate, and Miss Louisa Bowden, School Nurse, Ashton-under-Lyne, England; Miss T. A. Calder, Sister, Victoria Infirmary, Glasgow; Miss A. H. Turnbull, R.R.C., Superintendent District Visitors, Edinburgh, Scotland; and Miss A. Michie, Superintendent Q.V.J.I., for Ireland.

Miss Cox Davies invited those present to re-elect Sir Arthur Stanley as Chairman, and to give him a very warm welcome. He would come back to them not as a nominated member, but as one who belonged to them, because they had put him there themselves.

This was seconded by Miss Gibson and carried.

On resuming the chair, Sir Arthur Stanley thanked the members for re-electing him as their Chairman. Referring to the elected members, he said that Dame Sarah Swift had retired voluntarily as she thought they wanted new blood. He was glad to welcome Lord Knutsford, though he might not always have seen eye to eye with nurses in the past. Lord Knutsford was a man whom he would rather have with him than against him.

The meeting concluded with the usual votes of thanks.

## NURSES' ORGANISATIONS AND THEIR IDEALS.

### MEETING AT THE PRINCE OF WALES' HOSPITAL.

At the Prince of Wales' Hospital, Tottenham, on the 21st inst., speakers from the Royal British Nurses' Association, the College of Nursing, Ltd., and the Professional Union of Trained Nurses, addressed the members of the Nursing staff, and a considerable number of other nurses not connected with the hospital also attended. Mr. Carson, F.R.C.S., was in the chair.

The remarks of Miss Macdonald and Miss Sheriff-McGregor (representing the R.B.N.A. and the College respectively) were very similar to those given in our report of the meeting at the Temperance Hospital, except that at the close of her remarks Miss Macdonald pointed out that, although the Membership Roll of the Association would still continue, it had closed its Register because it would not be for the benefit of the State Register to run any voluntary Register, and to do so would tend to mislead both nurses and the public.

Miss MacCallum pointed out that a Limited Company, such as the College, was a Trade Union of Employers and it was therefore inevitable that, if such a federation were formed in the Profession, a Trade Union of the workers must follow. She stated the reasons why she, a College Member, had with her friends started the Trade Union, and spoke of the benefits which membership of the Union could give.

### DISCUSSION.

Free discussion followed, Councillor Beatrice Kent strongly deprecated the methods of the promoters of the College in appropriating the laurels which belonged by right to those who had led the nurses to victory in the long fight for State Registration, a reform to which many of those, now sitting on the College Council, had offered, in the past, the strongest opposition. Her adherence to the old motto "Steadfast and True" of the Association to which she was so proud to belong, caused her to feel that she must ever protest against the lack of truth with which the College constantly claimed that there was no organisation in the profession until it was founded.

Miss Jessie Holmes was not in favour of a Trade Union for Nurses, but Mrs. Paul said that she was convinced of the necessity for one if the nurses' interests were to be adequately protected. Miss Sheldon pressed for unity in the profession, contending that there was room for all the existing bodies.

Miss Carter enquired whether the College only admitted nurses with a three years' certificate of General Training, and another member of the audience enquired as to why the College provided nurses, removed from the Register, with no right of appeal.

Miss Sheriff McGregor explained the existing regulations governing the admission of nurses to the College Register, and with reference to what other speakers had said in connection with charity, stated that if their methods of raising money were not right the Charity Commissioners would interfere. There was a right of appeal for the College nurses.

### A MONOPOLY OF POWER.

Miss Macdonald said: "There is no *right* of appeal. By an act of grace your Council might permit a nurse to appeal, but there is no *right* of appeal. I will read to the meeting a clause in the Memorandum and Articles of the College to prove what I say." The

clause, which provides that the Council of the College has power to remove a nurse's name from the Register at will and without even notifying the nurse, was read. Miss Macdonald then continued: "As to what Miss Sheldon has said in support of unity, she is not more anxious than I am to see unity in the profession, but unity can be bought at too great a cost. So long as the College is out to grab everything for itself there can never be unity. If Miss Sheldon is so anxious for unity let her see that her hospital (Guy's) treats the nurses' organisations with the same fairness that the Prince of Wales' Hospital has done to-night, and grants the hospitality of its platform to the three organizations represented here, which it has refused to do. The College has sought only its own interests from the beginning. It has attempted to govern the whole profession—it has tried to become the law-making authority for the profession by asking for incorporation through a Nurses' Registration Act; it has tried to be the almsgiving authority through the Nation's Fund; it claims to be the educational authority, and to be the body in relation to nursing analogous to the General Medical Council in the medical profession. If, with an immense power of money behind it, it had been able to achieve all this for itself it would have gained such a drastic monopoly of power as to make the members of the profession literally its serfs. Again, it has used pledges which it had no right to give in order to swell its membership and Register; pledges unfair to organisations adopting more scrupulous methods.

Again, it uses methods to obtain its money of which we strongly disapprove. Take, for instance, the "Juliet" case. Supposing you went to the next house from here, said you had a sister, formerly a manequin, who had gone to the war as a V.A.D., was, as a result of this, in a broken-down condition of health, with no money, was going about with goggles and a shawl over her head, presumably for need of clothes; and for these reasons you begged for money to help her. Supposing, when challenged in the Press, you could not produce that sister! Where would you be likely to find yourself then? If it is wrong for you to take money through a faked appeal, is it less wrong for a Company to do it? I say it is infinitely *more* wrong for it to set such an example to the nursing profession. No, while such things happen there *never* can be unity in the profession. For there are other money changers besides those in the Temple at Jerusalem, and we should be false to the Christian faith if we did not imitate the example set to us there and fight for all we are worth to overthrow the tables of the money changers who introduce such methods of obtaining money into the profession of nursing; false, too, did we not fight with all the strength that is in us to keep our profession clean and true, and its honour above reproach." (Loud applause.)

At the end of this free expression of opinion the guests were entertained with coffee, and left well satisfied with the opportunity for an exchange of ideals.

Mrs. Campbell Thomson, O.B.E., presided at the Annual meeting of the Royal British Nurses Association on Monday, June 21st, at the rooms of the Medical Society of London. A report of the proceedings will appear in our next issue.

The Annual Conference of the I.S.T.M. is being held in London this week, from June 24th to 26th inclusive, opening at Mortimer Hall, 93, Mortimer Street, at 11 a.m. on June 24th, with an address on "The Art of Healing," by Professor Arthur Keith.

## LADY MINTO'S INDIAN NURSING SERVICE.

The report of Lady Minto's Indian Nursing Association for 1919, just received from India, records that in spite of the difficulties still experienced in obtaining passages for the Sisters, 28 have been sent out from England, and this increase in the staff has been of great assistance in the development and extension of the work of the Association.

The maternity homes established in Simla have proved most useful, a total of 74 patients having been admitted. Taking into consideration the fact that an institution for maternity cases is an absolute necessity in Simla, the Central Committee decided to lay before the Government of India a proposal that a Block specially designed for the nursing of maternity cases should be built adjoining the Walker Hospital. The scheme has received the approval of the Government, and it is hoped that the building will be ready for occupation in May, 1921. It has also been decided that a separate wing for maternity cases is to be built at the Hindu Rao Hospital (Ridge Hospital), Delhi, which will be ready in November this year.

Miss Ruth E. Darbyshire, R.R.C., Chief Lady Superintendent, in the report she submitted for 1919, states that the year has been one of satisfactory progress, and, on the whole, one of less difficulty than the previous year. It was hoped by March, 1920, to have a sufficiency of English trained Nursing Sisters. During the year 1919, 28 Sisters arrived from England, and 5 Sisters trained in India were appointed to the permanent staff. During the year, 25 Sisters left the Association for the following reasons:—Expiration of contract, 12; marriage, 8; released at own request, 2; invalided, 3. Five temporary Sisters remained at the close of the year. Miss Darbyshire reports that for the past three years the Association has been mainly dependent upon the services of the temporary staff, and its thanks are due to many of these nurses who have done excellent work in its service.

The Report of the Chief Lady Superintendent gives a brief account of the work of the various branches and centres, and concludes: "The Lady Superintendents and Nursing Sisters have done everything in their power to successfully carry on the work, and I should like to convey my sincere thanks to them for their loyal and devoted service. I feel that we can look back on 1919 with gratitude for the good services rendered, and that many patients would join me in my appreciation of the work of the staff."

At home, Miss M. E. Ray, late Matron of King's College Hospital, has been appointed Secretary of the Selection Committee.

The Report, which is admirably produced and illustrated, follows the usual admirable plan of giving the training school, special qualifications, and subsequent appointments of each member of the nursing staff.

## APPOINTMENTS.

### MATRON-IN-CHIEF.

**Territorial Force Nursing Service.**—Dame Maud McCarthy, G.B.E., R.R.C., has been appointed Matron-in-Chief for the period of one year. She was trained at the London Hospital, and was a member of Queen Alexandra's Imperial Military Nursing Service. She served in the South African War, was promoted to the rank of Principal Metron, and was Matron-in-Chief, Expeditionary Force, in France from 1914-1919, where she served with great distinction—service which has been recognised by the many honours bestowed upon her.

### MATRON.

**Pinewood Sanatorium, Wokingham, M.A.B.**—Miss Alice Maud Rennie has been appointed Matron. She was trained at Greenock Infirmary, and has been Sister at King Edward VII's Sanatorium, Staff Nurse at the Sanatorium, Nordrach-upon-Mendip, and Matron at the Ochil Hills Sanatorium. She has also had experience as a Queen's Nurse.

**Isolation Hospital, Southport.**—Miss Susanne Coulter has been appointed Matron. She was trained at the Leicester Isolation Hospital, and the Royal Infirmary, Manchester, and has held the position of Theatre Sister and Night Superintendent at the Women's Hospital, Liverpool; Ward Sister and Home Sister at the Isolation Hospital, Derby, and served in France throughout the war, being mentioned in despatches by Sir John French. She has also received the Royal Red Cross, first class, and the Croix de Guerre.

**Maternity Home, County Borough of Eastbourne.**—Miss Catherine Macintosh has been appointed Matron. She was trained at Sheffield, Royal Hospital, and at Queen Charlotte's Lying-in Hospital, London.

### HEALTH VISITOR.

**Wiltshire County Council.**—Miss Gertrude M. Jackson has been appointed Health Visitor. She was trained at the Guest Hospital, Dudley, and worked in Rangoon as a member of Lady Minto's Indian Nursing Association.

### NIGHT SISTER.

**Throat Hospital, Golden Square, W.**—Miss Ida Berry has been appointed Night Sister. She was trained at the Royal Infirmary, Oldham, and has held the position of Sister at the Children's Hospital, Birkenhead; in the Military Wards at the Royal Infirmary, Wigan, and the Victoria Hospital, Blackpool, and of Night Sister at the Children's Hospital, Nottingham.

## QUEEN VICTORIA'S JUBILEE INSTITUTE.

### TRANSFERS AND APPOINTMENTS.

Miss Dorothy M. A. Bale is appointed to Warwick; Miss Edith Callon to Widnes; Mrs. Jessie A. Clarke to Sleaford; Miss Lilian C. Coleman to Brixton; Miss Louisa Hogarth, to Skegness; Miss Jane B. McFadden, to Warwick; Miss Catherine Mackenzie, to Bolton as Senior Nurse; Miss Annie Mindham to Barnsley; Miss Edith A. Morris to Reading; Miss Elizabeth A. Morris to Kingston as Senior Nurse; Miss Jean Toll to Margate.

### HONOUR FOR SISTER PHILLIPS.

Sister Phillips, of Barnet Infirmary, who volunteered for service in Serbia during the typhus epidemic, has just received the Cross of Mercy from the Serbian Government in recognition of her valuable services at that time.

## PRESENTATION.

Before leaving the East Suffolk and Ipswich Hospital to take up work at Middlesex Hospital, Sister Kernick, who had charge of the wounded in Northgate Ward during the war, was presented with a lady's morocco leather handbag, together with a photograph of the ward in a gilt frame, and a leather bound address book.

The presentation was made on behalf of the present occupants of the ward, by Mr. C. Wolf, who has been a patient in it for over a year.

After the presentation, one of the ward nurses, on behalf of the nursing staff of the ward, presented Sister Kernick with a beautiful china morning tea set.

The beautiful gifts "in recognition of her indefatigable devotion to her work and sympathetic attention to the patients" will be greatly prized by the recipient, we have no doubt.

## THE ROYAL CHEST HOSPITAL, CITY ROAD, E.C.1.

### TUBERCULOSIS SCHOOL FOR TRAINED NURSES.

EXAMINATION RESULT. MAY, 1920.

Most valuable educational work is being done in the Tuberculosis School for Trained Nurses attached to the Royal Chest Hospital, City Road, E.C.1:—

*Passed with Distinction.*—G. M. Knight, A. B. Munroe, J. Howard, D. Provis, A. M. Lansdown, L. Bingham.

*Passed with Credit.*—M. Sullivan, A. J. Bell, C. Wilton, G. Carpenter, N. McNamee, G. Barratt, A. Thompson, E. St. George, G. H. Maynard, A. K. McLeod, E. King, N. Roberts.

*Passed.*—I. Pope, E. M. Homeyer, M. Stewart, A. E. Hughes, M. Richardson, E. Sharman, H. Williams, F. Morgan, Ada B. Smith, H. Cockrane, E. Bull, Elsie M. Brown, E. Milner, M. J. Phillipson, Margaret E. Knight, Elizabeth Smith.

## SCOTTISH BOARD OF HEALTH.

### EXAMINATION OF NURSES.

On May 11th and subsequent days the Scottish Board of Health held an examination for the certification of trained sick nurses, and of trained fever nurses, at Glasgow, Edinburgh, Dundee and Aberdeen. Miss Merchant, Matron of Stobhill Hospital, Glasgow, and Miss Chapman, Matron of the County Hospital, Motherwell, assisted in the practical part of the examination.

In all 376 candidates presented themselves for examination, of whom 148 were examined in Anatomy and Physiology, 159 in Hygiene and Dietetics, 24 in Medical and Surgical Nursing for Poor Law and General Trained Nurses, and 99 for Fever Trained Nurses, 48 in Midwifery, and 91 in Infectious Diseases.

#### RESULTS.

*Anatomy and Physiology.*—Distinction 9, Pass 91, Failed 48.

*Hygiene and Dietetics.*—Distinction 12, Pass 119, Failed 28.

*Medical and Surgical Nursing* (For Poor Law and General Trained Nurses).—Distinction 2, Pass 21, Failed 1. For Fever Trained Nurses.—Distinction 2, Pass 94, Failed 3.

*Midwifery.*—Distinction nil, Pass 36, Failed 6.

*Infectious Diseases.*—Distinction 9, Pass 79, Failed 3.

Twenty-one candidates have now completed the examination in General Nursing and ninety-four in Fever Nursing, and subject to the completion of three years' training in hospital to the satisfaction of the Scottish Board are entitled to the certificate of efficiency granted by the Board.

## HOSPITAL WORLD.

A grand garden fête and sale of work in aid of the Convalescent House at Nazeing will take place in the grounds of the Prince of Wales's General Hospital at Tottenham on Thursday, July 1st. All sorts of amusements are to take place to end up with a moonlight dance in the garden, if fine—in the hospital, if the weather is not propitious. Miss Bickerton and her staff are past masters of the art of entertaining, and we have no doubt they will help the Ladies' Association to make the fête a great success.

An evening concert in aid of the Royal Medical Benevolent Fund Guild is to be held in the Wigmore hall, Wigmore Street, W., under the patronage of H.R.H. Princess Arthur of Connaught on July 2nd at 8 o'clock, for which tickets can be obtained from Miss M. Ellis Rowell, 49, Beaumont Street, W. 1.

To raise funds to augment the supply of linen provided by the Ladies' Association, a Sale of Work arranged by the matron, sisters and nurses, was held at the David Lewis Northern Hospital, Liverpool, on Thursday, June 10th, at 3 p.m.

In the absence of the Chairman, Sir William Scott Barrett, Mr. W. H. S. Oulton welcomed the Lady Mayoress of Liverpool (Mrs. Burton Eills) in a brief speech. Having declared the Sale open, the Lady Mayoress, with her daughter Miss Doris Eills, visited and made purchases at the various stalls. There were ten of these (one of which was furnished by articles sent by "old" Northern nurses) arranged along each side of Ward 5, which had received a much needed coat of paint earlier in the week, and was consequently looking very bright and fresh. A wonderful collection of plain and fancy work, books, pictures, flowers, fruit, butter, eggs, soap, etc., was displayed.

Tea was provided in the Recreation Room, the Liverpool City Police Band played in the grounds, and, later, an excellent concert arranged by the Resident doctors given in the Massage Room (the pre-war Recreation Room, a miniature theatre, temporarily converted for the treatment of Military Pensioner patients) brought in over £7. At 6.30 p.m., when the Sale closed the splendid sum of £350 had been realised.

The hospital owes a debt of gratitude to its Matron, Miss Renaut and the Nursing Staff for their arduous and successful work on its behalf.

## THE NURSING AND MIDWIFERY EXHIBITION AND CONFERENCE.

The Nursing and Midwifery Exhibition and Conference was opened at the Royal Horticultural Hall, Vincent Square, Westminster, S.W., on Tuesday, June 22nd. A visit to the stands showed that many exhibits of interest had been gathered together.

The stand of MESSRS. ALLEN & HANBURYS, LTD., Bethnal Green, E., is attracting a large number of visitors, and its inclusive character will repay their study. Amongst novelties is to be noted "Allenburys Fruiting Confection," which the firm has recently put on the market; it is a pleasant laxative which children like, and adults will find both efficacious and agreeable.

MESSRS. BOOTS, THE CHEMISTS, Station Street, Nottingham.—Here one sees, under very convenient conditions, the many articles of special interest to nurses supplied by this firm. The First Aid Equipment for an Ambulance Room is admirably and conveniently designed. Toxol Soap may be had either in the surgical variety or for ordinary toilet use, when it will be found to possess antiseptic, deodorant, disinfectant and cleansing properties.

BOVRIL, LTD., 148-166, Old Street, E.C.1.—We specially noted here "Campaigning Bovril," which should prove a popular form of this well-known preparation. It is put up in jars, is semi-solid in form, very easily prepared, and pleasant to take. It may also be spread on toast or biscuits, when it forms a delicious savoury.

THE BRITISH JOURNAL OF NURSING Stand is well placed near the GLAXO Cottage and, in charge of Councillor Beatrice Kent, is doing brisk business, and disseminating much information on professional affairs. It is flanked on one side by the South Kensington Nurses' Co-operation, and on the other by the Mothercraft Training Centre, and near by is the interesting exhibit of the Royal Free Hospital.

WINCARNIS.—Messrs. Coleman & Co., of the Wincarnis Works, Norwich, have now overcome the shortage difficulty, and have on hand an ample supply of this preparation. The firm has recently amalgamated with Messrs. Snelling & Sons, Ltd., of Berr Street, Norwich, and now place upon the market "Tristella" Shredded Beef Suet, which can be used for making delicious and nourishing puddings and in a variety of other ways.

GENATOSAN, LTD., 12, Chenies Street, W.C.1 (Chairman, the Viscountess Rhondda) are most effectively represented at a very attractive Stand. We may specially mention their excellent chocolates with which Sanatogen is incorporated, thus forming a sweetmeat of high nutritive value. During the Exhibition this is being sold at 4s. a lb.

HORLICK'S MALTED MILK, Slough, Bucks.—There is no more popular stand at exhibitions than that of Horlick's Malted Milk, for the firm

are past masters in the art of presenting their speciality. But another important factor is the excellence of the exhibit. Horlick's Malted Milk is light, easily digested and highly nutritive.

J. G. INGRAM & SON, LTD., Hackney Wick, London, E., are well known manufacturers of every description of Surgical India Rubber Goods. Special note should be made of their "Eclipse" Hot Water Bottles, and of the ingenious patent washer with which the stopper is fitted, so that it is quite impossible that the washer should belost.

MESSRS. KEEN, ROBINSON & Co., LTD. (Incorporated with J. & J. Coleman, Ltd.), London and Norwich, are showing not only their valuable "Patent" Barley, from which excellent Barley Water can be quickly and economically prepared, but also Coleman's Mustard, and Mustard Oil which is a mild counter-irritant, and is prescribed with good effect in some cases of rheumatism.

THE "MARMET" BABY CARRIAGE Co. (E. T. Morriss & Co., Ltd.), Marmet House, Finchley Road, N.W. 3, are showing one of their up-to-date Baby Carriages. Those visiting the Exhibition should not fail to acquaint themselves with its merits.

MEDICAL SUPPLY ASSOCIATION, LTD., 167-185, Grey's Inn Road, W.C. 1, make a special feature of their Grevillite Scale, specially designed for Infant Welfare Centres, concerning which absolute accuracy is guaranteed. Again, there is their very excellent hammock and balance for weighing babies, and costing only 7s. 6d. Rubber Gloves are on view at 1s. 6d., and thermometers at 2s. during the Exhibition. The firm also supply bottles in plated cases for nurses' bags.

NATIONAL UNION OF TRAINED NURSES, 46, Marsham Street, Westminster, is giving away literature giving particulars of the work of the Union, its Club, Employment Centre and terms of Membership, and has an interesting display of its excellent Health and Child Welfare Posters. Its representatives are also enterprisingly undertaking to type testimonials at the stall at moderate terms.

SANAGEN Co., LTD., Sheepcote Lane, Battersea, S.W., are offering for consumption prepared specimens of this Nerve Food, which was awarded the Gold Medal at the International Medical Congress in London in 1913, as well as delicious little cakes in which it is incorporated.

SOUTHALL BROS. & BARCLAY, LTD., Lower Priory, Birmingham, are making a special feature of their Sanitary Knickers, fitted with protective, easily removable, and other protective garments. Southall's Towels and pads are also rightly popular, as they are sanitary, antiseptic, absorbent and of downy softness.

SURGICAL MANUFACTURING Co., 83-85, Mortimer Street, W. 1.—This firm is showing, at most reasonable prices, some excellent instrument sterilisers, in stamped-out copper, nickel-plated, with improved folding stand and powerful spirit lamp, the larger sizes of which will take midwifery instruments; also a very fine selection of midwifery and other bags (fitted and unfitted), in both morocco and rexine, which visitors to the Exhibition should make a point of inspecting—as well as temperature and other charts.

VIROL, LTD., 148-166, Old Street, E.C. 1, have an attractive display of this admirable and well-known food—also of their latest product, "Virolax," which is a combination of 60 per cent chemically pure liquid paraffin with 40 per cent. of "Virol," from which a portion of the animal fats has been omitted. It forms a pleasant and effective laxative, which, in the right dose, may safely be given to babies.

"JOUJOU," 104, George Street, Portman Square, W. 1, is displayed to great advantage near the Gas Light and Coke Annexe. Maternity nurses should make a special note of this brassier, as it does not interfere with infant feeding.

### THE ANNEXES.

There are two Annexes to the Exhibition—Annexe A, that of the GAS LIGHT AND COKE COMPANY, Horseferry Road, Westminster, S.W. 1, to the left-hand side of entrance; and Annexe B, THE GLAXO CO., 155, Great Portland Street, London, W. 1, to the right-hand side of entrance.

The Gas Light and Coke Company's Annexe (A) contains a model gas kitchen and rest room, or model bed-sitting room, and many other interesting fixtures. The exhibit should not be missed.

The Glaxo Co.'s Annexe (B) represents a cottage, which "Glaxo" most considerably invites nurses to use as a resting place, where they can meet their friends and—if they desire it—refresh themselves with a cup of rich, hot "Glaxo." The Cookery Demonstration given by Miss Graham, for the benefit of nurses who are specially interested in the use of "Glaxo" in the dietary of children and invalids, and the delicious dishes she concocts, should inspire nurses to go and do likewise.

### PROFESSIONAL EXHIBITS.

The most important of the professional exhibits, of which there are disappointingly few, is the model of a gynaecological and maternity "element," arranged by the Royal Free Hospital. Under the new system of teaching in medical schools a unit is composed of medical, surgical, and gynaecological elements. The model, the arrangement of which Miss Cox-Davies, the Matron, personally supervised, is an exact replica of the maternity and gynaecological block of 60 beds at the Royal Free Hospital. The beds with quilts embroidered with the monogram of the hospital, the tiny cots with their tinier inmates, are all exact to scale, the lockers and towels for each child, the store cupboards, and, most of all, the wee instruments in the operating theatre are miracles of deftness. Other interesting exhibits, are those of the Mother Craft Society, showing a Truby-King cot, &c., and of the South Kensington Nurses' Co-operation, which is showing a complete outfit for surgical operations, a portable lamp, the white linen cap worn by the nurses when at work, &c.

We hope to describe next week the bed for a fractured femur shown by the Edmonton Maternity Hospital, and other professional exhibits.

## BOOK OF THE WEEK.

### "THE TALL VILLA."

Our readers who are interested in "psychics" will read this book with avidity. It is gracefully conceived and written by one who has evidently made a study of the sub-conscious self, so that the transitions from the normal to the supernatural are set forth in a convincing manner.

The whole environment of the book is both subtly and powerfully made to enhance the psychic atmosphere.

"And there is always the tall villa," Frances Copley said in her quiet, well-bred, slightly husky voice.

"As she spoke she dropped the stump of a half-smoked cigarette into her finger-bowl, and looked at her husband across the dinner table. It was the first time she had looked at him during his surprising confession."

To put it briefly, she had just learned that her husband had ventured his fortune and had lost.

"It was her habit to surround herself with beautiful things. To do so appeared to her to be reasonable and right.

The appointments of the room and the dinner table bore witness to her graceful taste and power of spending. She loved half lights, soft subtle colours, exquisite surfaces and textures. By the employment of these she sought instinctively to veil the too frequent crudities of life.

Now Frances Copley understood that the day of veils and half lights was over. For all these beautiful and costly things with which she had screened herself from coarse reality were doomed to dispersion. They must go; were already gone in point of fact if honour were to be satisfied.

"Thanks to his abounding vitality, to his good looks, and to a certain dazzling plausible way he had with him, Morris Copley, though less well bred and less well connected, eclipsed and dominated his wife. Tacitly she consented to be passive and ineffectual." They had no children, and without a baby in her arms she came a poor second, though he was fairly faithful and genuinely fond of her.

"And there is always the tall villa," said Frances Copley.

From Grosvenor Square to Primrose Hill is a far cry, and the somewhat pretentious house, minutely described, was more remote still from Frances Copley's natural entourage.

The numerous windows seemed to her to endanger all nice sense of privacy and repose.

She had a singular suspicion, too, of never being quite alone, though, in fact, she had never passed so many solitary hours. Morris regarded the house as a lair to sleep in. To him it was simply unspeakable.

Yet Frances could not call herself unhappy. She now saw that hitherto she had been mercilessly

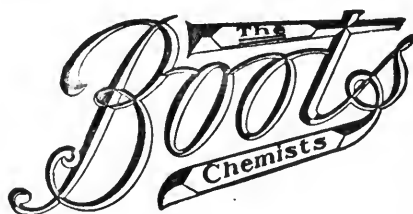
\*By Lucas Malet. Collins & Sons, Ltd., London.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

clamped to the social wheel. But the tall villa, now she came fairly to dwell within its ridiculous portals, through its isolation, not to say ostracism, freed her effectively if somewhat ironically from the wheel.

It gave her leisure and the accessibility to impressions which in persons of temperament leisure confers.

She felt delicately alive, delicately aware, in every nerve, at every point.

There was a "sly" atmosphere about the villa.

Her husband became aware of a subtle difference in her. He had been explaining to her that he thought he saw a way back to Grosvenor Square, and all that it stood for. He lifted his head sharply and nervously, catching the distant howl of the wolves in the Zoo.

"Confound the brutes!" he said in sudden anger, and "For goodness sake, Fan, give up watching for things that aren't there! Pray don't let it grow upon you. I tell you I don't like it. It gives me the creeps."

He could when he chose be a vastly engaging person. She acknowledged as much, "but tonight he had interfered with an atmosphere which she had begun to recognise, and to anticipate with half fearful delight. A presence felt rather than seen."

When Morris announces his intention of going abroad for six months to seek his fortune, she was by no means displeased.

Would she accompany him? She would willingly. The offer was regretfully by Morris declined, to the relief of both.

"Let me have my own way," Frances said, her mothlike eyes strangely alight.

"And aren't we both just bluffing?" she thought to herself. "How very hateful!"

While on a visit to her relatives, in Morris' absence she had learned of an ancestor, Lord Oxley, who had lived with his mistress, a certain beautiful Flora Cressidy in the tall villa.

"She had been too deeply dipped," according to Lady Lucia, to get a divorce, and Lord Oxley was madly infatuated with her. She vanished one fine morning with one of her former lovers and he could not make up his mind to live without her.

"And so—shot himself," Frances said very softly.

This then, was the answer to the "sly" attitude of the house. "Her thoughts flew forward with a splendour of tenderness to the tall villa and to Alexis, Lord Oxley, whose soul was, she believed, held there in thrall."

When the taxi came first in sight of the house after the happy grandeur of Napworth and the quiet dignity of Allenby Lodge, she seemed to detect a grimacing smirk as though it mocked her high souled fervour.

Not to-night, but to-morrow at five o'clock and not till then—having made herself ready in body and soul, she would enter the drawing-room and wait.

She sat at the piano and gave herself to the weaving of dim-coloured pensive harmonies, and, when at the end of half an hour the doors on to the gallery silently opened, and as silently shut, she took the strange event calmly.

Just perceptible through the mournful, now fading evening light she saw an upright shadow—that of a man tall in height—standing behind her. At the same time she felt a chill draught of air shiver her transparent drooping sleeves and stir the small stray curls upon the nape of her neck.

The gist of this remarkable story is that Frances became enamoured of her ghostly visitor as he more and more divulged himself to sight and sense.

The rumours of her husband's unfaithfulness abroad barely troubled her as she became absorbed in this spiritual love. She sets herself to obliterate the unhappy past which caused the soul of Alexis to roam.

She finally begs him not to come back until he has permission, to lead her across the bridge while it still bears.

"Will you try, most beloved," she tenderly insisted, "will you try?"

He came back as she asked.

Frances, without any shock of surprise, not only saw the figure of Lord Oxley, but for the first time distinctly saw his face. "Ah, our bridge still carries then!" she cried. "Will it bear us both? Can I too cross it?"

"You have already crossed it," he told her.

While she stood close beside him, her ghostly hands in his, his ghostly lips on hers, the silver grey clad woman still rested happily smiling, her mothlike eyes wide open, in the gilt arm-chair beside the fireplace.

H. H.

### COMING EVENTS.

*June 25th.*—Professional Union of Trained Nurses. Monthly Meeting Public Health Section. 17, Evelyn House, 62 Oxford Street, W.1. 5.30 p.m.

*July 2nd.*—Colindale Hospital, The Hyde, Hendon, N.W. 1. Unveiling of the Memorial to Hendon Nurses in the Nurses' Home. Tea. Meeting of the Nurses' League.

NATIONAL ASSOCIATION FOR THE PREVENTION OF INFANT MORTALITY AND NATIONAL BABY WEEK COUNCIL.

Conferences on Maternity and Child Welfare will be held in connection with Baby Week celebrations as follows:—

Leeds, in the Philosophical Hall, on Wednesday, June 30th.

Manchester, in the Mayor's Parlour, on Thursday, July 1st.

Brighton, in the Permanent Art Gallery, Church Street, on Friday, July 2nd.

Bradford, in the Queen's Hall, on Tuesday, July 6th.

Wrexham, in the Church House, on Wednesday, July 7th.

Crewe, in the Council Chamber, on Friday, September 10th.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## INDIVIDUAL RESPONSIBILITY.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I have always maintained that on each individual nurse rests the responsibility for the betterment and upholding of the profession; some have more time than others, some make more time. Lately, I have been in a back-water but the Journal keeps one up to date, and the last numbers have given much food for thought:—

(1) The unprofessional advertisement of the Scottish Nursing Council for a Registrar! Who can know nursing standards but a nurse? Besides, why should any but a nurse get the salary offered? It is nurses' money and would any other apply if the salary offered were the usual pittance?

(2) The alertness of the Professional Union of Trained Nurses (Glasgow Branch) in forwarding an emphatic protest to Edinburgh is worthy of note; but I have not yet seen any mention of the Scottish Nurses' Association action. Their delegates must have been over-ruled; yet surely the members do not accept the theory, that in Scotland no nurse is to be found with sufficient brains or acumen to fill the post the English Nursing Council is offering to her professional sister? Scottish nurses must refuse to accept this "lay" stroke or more trouble will follow. I await the next B.J.N. with impatience.

Yours truly,

J. B. N. PATERSON.

Ardenhurst,  
West Kilbride,  
Ayrshire.

[As Miss Paterson knows this journal was the first to point out that the position of Registrar to a Nursing Council authorised by Parliament to organise nursing education, examine and register trained nurses, and to maintain discipline throughout the profession, could only be adequately filled by a highly trained nurse with administrative ability, and this opinion is, we believe, shared by every nurse representative on the English Council. We sincerely hope that the nurses on the Scottish and Irish Councils will take a determined stand on this principle, and insist that a well-qualified professional woman shall be appointed to the position of Registrar; if not, with all due deference to these ladies, they will have failed in their duty to the profession at large, and as Miss Paterson writes, "more trouble will follow."—ED.]

# KERNELS FROM CORRESPONDENCE. ITALIAN TRIBUTE.

*Sister Carey.*—"It is a pity wreaths of flowers placed at the foot of the Cavell Memorial die so soon—some have lovely words attached. The

following inscription was attached to the wreath contributed last week by soldiers of the Italian Army:—

"To the gentle English heroine whose sublime martyrdom has rendered the name of her fatherland sacred throughout the world.

FROM ITALIAN SOLDIERS."

Captain Garibaldi, the principal member of the deputation, who took part in the ceremony, is a grandson of the Italian Liberator, who was one of the heroes of the English people in the middle of the last century."

## A VERY TYRANNICAL PROCEEDING.

*R.B.N.A. Member.*—I note that Lord Burnham is reported in the *Daily Mail* to have said at the unveiling of the Edith Cavell Memorial at Paris that "Tyranny, whatever colours it wears cannot exist side by side with a free Press." Proof positive, if true, that his organ the *Daily Telegraph* is not a paper which can be placed in that category, to judge by the merciless manner in which he excluded our letters repudiating his shilling doles for nurses; a very tyrannical proceeding."

## THE LAWS OF NATURE FORBID.

*A Certified Midwife writes:* "I notice that a speaker at the annual meeting of the Clapham Maternity Hospital said that midwifery 'for some reason did not appeal largely to the educated classes.' She gave as the reason that 'women would not undertake work that interfered with their week-ends or with their nights in bed.' In my opinion they are quite right not to do so. Of course, in single-handed posts where the calls are infrequent, the midwife must be prepared to answer a call at any time, but where several midwives work from a centre the irregular night work which is so trying, and so prejudicial to a midwife's health might be greatly lessened if not abolished altogether, by proper organisation. It is a foolish and wrong policy to conserve the health of one section of the community by breaking down that of another, and that is what happens when midwives have constantly broken nights. Where the midwifery work is of any size there should be a regular day and night staff, and the day staff should only be called up when there is an exceptional rush of cases. Nurses and midwives who know something of the laws of nature know that if they defy them they will eventually have to pay the penalty, and consequently do not take up work under conditions which court a break-down."

## OUR PRIZE COMPETITIONS.

*June 26th.*—Name all the diseases you know which may be disseminated by insect carriers, mentioning in each case the insect which is responsible, and stating how the infection is introduced into the human body.

*July 3rd.*—What are the causes of swelling of the legs (1) during pregnancy, (2) after labour? How would you deal with such cases?

# The Midwife.

## POST-GRADUATE WEEK.

### AT THE GENERAL LYING-IN HOSPITAL, YORK ROAD, LAMBETH.

The eighth Annual Post-Graduate Week at the General Lying-in Hospital, York Road, opened on Monday, June 21st, with its usual *éclat*. The weather, which on the previous day had threatened to spoil the fun, changed its mind, and the "week" started with its usual good luck. As our climate, however, is uncertain, coy, and hard to be even with, it was thought prudent to have the tea indoors, and the "ball was kicked off" from the entrance hall of the hospital, which was charmingly adapted to the occasion.

York Road is second to none in hospitality, and the guests were received by the Matron with her usual graciousness. The tables were loaded with good things (including *sugar*), which Sisters and pupils alike were assiduous in pressing upon their guests.

The decorations of the tea tables were particularly pretty; foxgloves, wild parsley, lupins, and snapdragons translated smoky Lambeth for the time being into the atmosphere of a country garden.

The popularity of Post Graduate Week shows no sign of waning, for upwards of one hundred midwives from all parts of the country have enrolled this year. And a merry company round the tables they proved. There could be no doubt as to the nature of the gathering, for above the clatter of the cups and the ripples of laughter could be heard—

"She had *triplets*, my dear."

"Oh, of course, *she* would!"

Whether this perversity was ascribed to the mother or the midwife was left to conjecture.

The difficulties of breast-feeding, the bad luck of "all night cases but two, my dear," interspersed between bites of bun and cress sandwiches.

The general air of enthusiasm among the post-graduates was most inspiring and accorded with the "make-yourself-at-home" atmosphere of the hostesses.

The guests having done full justice to the fare, drifted one by one into the sitting-room, where bookings were eagerly made for the fixtures of the following day, and earnest discussions took place as to their relative attractions.

Since it was obviously impossible to be in two places at once, the decision as to superior merit had to be arrived at.

This first successful day of the Post-Graduate Week concluded with a lecture by Dr. Fairbairn, on "Preventive Medicine in Relation to Midwifery."

It seems desirable that the example of a Post-Graduate Week should be widely followed in general hospitals for the benefit of trained nurses.

## BABY WEEK.

"Baby Week" appeals to us all, and is once more upon us, and will be held for the fourth time at the beginning of July, and conferences will be held not only in London, but at Leeds, Manchester, Brighton, Bradford, Wrexham and Crewe. The National Baby Week Council has done much to increase infant welfare centres, from 800 to 1,700 in England and Wales, and it has also identified itself with the new movement known as the Children's Era, which has the physical and moral welfare of young school children much at heart.

The special subjects to be discussed are: (a) Widows' Pensions; (b) The home and its substitutes: The care of young children in the home as compared with their care in institutions; (c) Infant Welfare work: A retrospect and a forecast; (d) The decay of parenthood and its menace to the race; and the speakers will include Mrs. H. B. Irving, Mrs. H. A. L. Fisher, Dr. C. W. Saleeby, Dr. H. W. Pooler, and Miss R. Smith.

## DENTAL DISEASE AMONG NURSING AND EXPECTANT MOTHERS.

Dr. Harold Waller, speaking at the recent Dental Conference at Manchester, emphasised the single clinical fact, which has come to light in the study of infants, namely, that diseased teeth in a nursing woman are capable of disturbing the health of her baby at the breast. The extreme importance of breast-feeding has now become generally acknowledged.

Many disorders of health in young children point to a common source of origin—some interference with nutrition in the early months of the first year of life.

Long-standing sepsis in the mouth has been found to be a widespread cause of ill-health among working-class women in country districts as well as in towns. It assumes various forms and lowers their general health much below normal.

There is at present a state of tolerance and indifference to the existence of disease of the teeth, and a reluctance to part with those decayed or diseased. Most people are not aware that bad teeth are responsible for a loss of general health. Careful investigation is advisable before attributing ill-health to the condition of the mouth. The Conference should be of value in spreading a truer knowledge of dental hygienics.

A case described of a breast-fed baby unable to digest its mother's milk was found to be due to oral sepsis on the part of the mother. After extraction of the teeth, the infant's condition rapidly improved. This case also showed that it is the presence of unhealthy teeth, not their absence which makes for harm. A second child was subsequently successfully fed.

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## EDITORIAL.

### THE ART OF HEALING.

Those who attended the conference convened by the Chartered Society of Massage and Medical Gymnastics—until recently the Incorporated Society of Trained Masseuses—at Mortimer Hall, W., on June 24th, listened to a lecture from Professor Arthur Keith, extraordinarily stimulating and interesting to all those whose work is concerned with the art of healing.

The thread of thought running through the whole of the lecture was that Nature is the great repairer, the great healer; that, in so far as those concerned with the treatment and care of the sick study the methods of Nature, they are working on sound lines, that success is best attained by assisting her, but that, without any assistance, Nature's powers of healing and repair are very great. Professor Keith instanced the teeth as parts of the body over which Nature has no power of repair. Why did Nature so forget herself as to give the teeth no power of healing? The enamel was so dense that she could not afford to put into it the minute nests of bone cells in which the virtue of healing lies. But such cells are provided with nerves, and Nature knew what she was about. What would one's position be on cracking a nut, or eating the foreign meat supplied to us at the present day, if the enamel of the teeth were provided with nerves?

When a muscle, such as the biceps, is torn, blood oozes out, and fills the gap; then mysterious messages, the origin of which we do not understand, are sent out to the white corpuscles, and they come crowding in from all parts of the body to clear away the debris. Then, the real workmen begin the work of repair. The cells on each side of the rupture change their mode of life, shape, and activity till the

newly formed connective tissue has filled up the gap, when they stop work, no longer continue to bind, change their shape again, and settle down to a passive life, and a seam of connective tissue is left. The surgeon does not say "I can mend that muscle," but "I can help Nature to mend that muscle." The stitches he puts in are not going to hold the wound together; that is done by the connective tissue—by Nature's spinning. The cells which form it are no undisciplined mob, but trained soldiers who know their places, and go about their work. The problem of the art of healing is how to help these cells.

John Hunter understood that the surgeon was Nature's assistant. He realised that the red tissue was his friend, and studied it as a gardener studies his garden. Then Pasteur and Lister came along and demonstrated that the great enemies to the healing of tissue are minute organisms, and that the great assistant to the art of healing is cleanliness.

No doubt, said Professor Keith, the brain has a very direct influence on the body, and can help or retard Nature. Results depend largely upon how far the body can enlist the sympathy of the brain, and that is often how the quack gains his successes. Such success as has attended Christian science hangs on this.

This knowledge (which is utilised by the quack) also stands by those who are conducting a rational, not a quack, practice. It increases your confidence and makes you study each case much more closely, so that you may learn what you can best do to help. Those who carry on work on these lines will have added something to the good of mankind.

We wish all nurses could have heard every word of this lecture, and hope that they will study and practise the principles which it inculcated.

## THE NECESSITY OF HOSPITAL TRAINING FOR MENTAL NURSES.

BY SIR ROBERT ARMSTRONG JONES, C.B.E., M.D.,  
F.R.C.P. formerly Medical Superintendent  
L.C.C. Asylum, Claybury, and Lt.-Col.  
R.A.M.C.

In the last Report of the Board of Control (Lunacy Commissioners), dated August last year (1919), there were on January 1st, 1919, a total of 116,703 persons notified as insane in England and Wales. It is somewhat striking that since the war in 1914 there has been a decrease each year in the certified insane. In the first two years of the war, 1915 and 1916, the decrease was assigned to social and economic conditions, because everyone who could be occupied easily found a situation and the demand for persons to work was so great that moderate incompetence and some infirmity were readily tolerated in order to release every healthy and able-bodied person for war work, either overseas or at home; as a result wages were high, and there was no difficulty in finding occupation for anyone who wished to work. For this reason there was far less domestic stress, anxiety, and strain, to get a livelihood. Everybody found a job and everybody was well paid, and although the prevailing anxiety about relatives and friends at the front brought their quota of nervous breakdown and insanity, yet the worry of financial inadequacies—the concern about *res angustæ domi*—were practically non-existent. During the last two years of the war there was still a decrease of notified insanity—even a greater one than in the first two years—but this was due to the heavy and appallingly high death-rate in institutions for the insane, which has brought them into undesirable public notice. The insane in the asylums suffered, as did the sane outside, from the limitations of food and warmth, but owing to the failure of their nervous system they were less able to withstand the hardships implied by rationing, and in consequence of which the death-rate amounted to 200 per thousand (in one asylum 382 per thousand) of the daily average resident in all institutions, i.e., more than ten times the death-rate among the normal population outside, although the latter included deaths from zymotic and other diseases as well as the high death-rate from infant mortality. Such an incidence of illness as is implied in this high death-rate among the insane demonstrates the need for the best possible trained nurses to look after mental patients. The analysis of this high death-rate included tuberculosis on an extensive scale, amounting to 52 per 1,000; organic heart disease, 16 per 1,000; renal disease, 10 per 1,000; pneumonia, 17 per 1,000; other causes being epilepsy, general paralysis, dysentery, enteric fever, influenza, and organic brain disease, conditions which call for the best and most careful nursing. The rate of mortality among the insane in asylums was so high during the last year of which we have an exact knowledge

that it called forth adverse comments in a leading article in the *Times*.

We have given some reasons above for the diminished number of admissions, viz., that these were related to special economic conditions connected with the war, but there is another factor in the diminished incidence of insanity which also needs to be taken into consideration, and that is the fact that no soldier and very few nurses were certified as insane until they had been nine months under treatment in special mental hospitals under the military authorities, during which period many of them naturally recovered. As the illness of these patients was detected early and on the first appearance of symptoms, owing to failure to perform their usual military duties, they were at once brought under notice and were received into one or other of the base hospitals for treatment, and afterwards into some of the special mental or neurological hospitals at home, where, as stated, many, if not most of them, recovered. These institutions, although previously in use as asylums for the insane poor, were handed over with their staff to the military authorities, and were given other names to lessen the possible stigma; for instance, the Lancaster County Lunatic Asylum was called the Lord Derby War Hospital, the Middlesex County Lunatic Asylum became the Napsbury War Hospital, the L.C.C. Lunatic Asylum at Horton became the Epsom War Hospital. Over 20,000 men suffered from mental and nervous breakdown during the war, but these were not certified unless and until they had been nine months or more under treatment. These, or many of them, would probably, under the old conditions, have been certified at once as insane, had not the Director-General of the Army Medical Service made such preparations with the civil authorities to receive the soldier who had failed mentally and nervously from the strain and stress of army service into these special "war" hospitals. It is unsatisfactory to realise that, in addition to the excessively high death-rate (which has never before been paralleled among the civilian insane), during the last year of which we have a record, the recovery rate for the insane has also decreased considerably.

In regard to the enormously high death-rate allowance must be made for the absence on active service of many of the male staff of the asylums, as also of some members of the female staff who left for specific duties in connection with the war, so that both the male and female nursing staffs in many of the asylums were compulsorily depleted. Add to these factors the overcrowding the ordinary patients, so as to make room of the soldiers, and here we have some of the chief factors which have contributed to the high mortality rate, but great dissatisfaction has been felt about this point, and a feeling of marked uneasiness has gradually grown up in the public mind about our methods of dealing with the insane; suspicions were felt that the insane generally were not under the best condition for



recovery, and special representations were made by the Board of (Lunacy) Control to the Committee sitting to consider the question of "reconstruction" that the legal treatment of the insane in this country might be considerably improved. The Medico-Psychological Association of Great Britain and Ireland, consisting of medical men who are entrusted with the care of the insane, also appointed a special committee to consider this matter and how to improve the care and treatment of mental disorders. This committee recommended the early care of mental cases in the ordinary general hospitals as well as the establishment in thickly populated urban districts of what they described as "psychiatric clinics" for early unconfirmed cases of mental and nervous disorder, such hospitals, for instance, as the Lady Chichester Hospital established at Brighton through the public spirit of Lady Chichester acting upon the advice and under the direction of Dr. Helen Boyle, and we have the potential "psychiatric clinics" in our splendid Poor Law Institutions throughout the country. The fact that many of the mental and nervous cases which have occurred among our soldiers have been those of wounded men, and that the breakdown of some was caused either by serious injuries to the head or that many of them suffered from debility brought on by malaria, dysentery, influenza, chronic wounds, or from tropical diseases of various kinds, point out the great need there is for mental nurses who are also fully trained hospital nurses so that the supervision and nursing care of those who have broken down in military employ should be in competent hands; more and more does it appear necessary that a mental nurse should also be a fully trained and properly equipped hospital nurse, accustomed to deal in a skilled way with all the conditions of bodily disorders.

It may be truly said that the war has given all thoughtful persons an immense impetus to secure adequate sick nursing for the mentally ill. There are very few women who have not shown ardour and patriotism in helping our sick and wounded soldiers during the war, and the wonderful support given to the Red Cross movement demonstrates how everyone not only sympathised with affliction but gave his or her practical help in the relief of sickness; but the evolution of the feeling of charity and pity for the sick and wounded soldier is not of recent date. It began as far back as the early days of the Order of S. John of Jerusalem in the time of the Crusades, although in those days it was more of a religious duty and a sentiment. In our days it is the practical appeal of sentiment to science. Every war from that of Cyrus to Napoleon has demonstrated the insufficiency of ordinary measures of relief in war-time, and in previous wars the wounded were often abandoned to the convents and to charitable persons. At the siege of Dantzic there were 1,600 wounded and 2,000 sick, yet not a single straw mattress was provided for them to lie upon, there were no basins to wash their wounds and no nurses to attend them. There was no linen, no food, and there were no candles

to light the hospitals by night and no preparations whatever are recorded for cases of mental illnesses. For five days the wounded never left their wagons, which served as beds as well as transport carts. At the taking of Spire in 1792 the wounded were delayed from 24 to 36 hours before removal, and the greater number of the sick and wounded perished, as certainly did the mental cases: After Waterloo, the wounded were conveyed to Antwerp in boats to the places appropriated for them along the Arsenal Quay, but everything for their care and comfort was wanting; there was no lint, linen, bandages, pillows, sheets, nor blankets. The complete absence of medical comforts was responsible for the dysentery, cholera, diarrhoea and other sickness that occurred in such numbers during the Crimean War, for at the battle of Alma the wounded men were left exposed for two whole days and nights on the battlefield. Even in the last great war carelessness in regard to the sick was in some instances barbarous, and the improvidence in regard to medical nursing was most culpable, as anyone may read who has seen the strictures passed upon those in authority in regard to the early campaign in Mesopotamia yet the medical and nursing care of the sick, taken on the whole, a glorious record throughout the war. Neglect of the sick in war has been previously described as the crime of high treason against humanity and it led a great military medical writer, Dr. Chenu, to state that if the honour and the defence of any State should require of every family—from the most noble to the most humble—the separation from and the sacrifice of a son, a brother or a father, as was the case with our own country in this war, such a sacrifice as is implied in conscription, must be only on the positive understanding that the State shall take the place of the absent family and shall assure to its defenders prompt and efficient assistance whenever this is required. The State must itself undertake those duties which the absent family would themselves at any cost have fulfilled to soothe pain, to save life, or to lessen the agony of any one of its members. As stated, we know that during the past war the medical services rendered to the sick and wounded soldier, as also to the nervous and mental sufferers, were, with the exceptions mentioned, of the most humane kind, and of the very best, and what we provided in war we desire in the name of humanity to secure for the civilian in peace times.

*(To be concluded.)*

#### HELP FOR OUR OWN POOR CHILDREN.

The Secretary of the R.B.N.A. will be glad to hear from nurses who will give a few hours on Flag Day, Tuesday, July 6th, to sell "Blue Birds" for the Waifs and Strays Society. Last year several were kind enough to do so with the result that a very substantial sum was sent from the office to Prebendary Carlile for this most deserving charity.

## NURSING ECHOES.

An interesting ceremony will form part of the business at the General Meeting of the League of St. Bartholomew's Hospital Nurses on July 3rd. A Presentation is to be made to Miss Beatrice Cutler on her retirement as Hon. General Secretary to the League for six years.

Miss S. J. Cockrell, the Matron of St. Marylebone Infirmary, Notting Hill, invites all Marylebone trained nurses to a garden party and the First Annual Presentation of Prizes to the Probationers, on Wednesday, July 14th, at 3 o'clock. Any nurse living at a distance who would like to be put up for the night, and those who have not yet received an invitation card, are requested to write to the Matron as soon as possible, when one will be forwarded. This should be a delightful reunion after the war.

A very delightful "At Home" was that given by the Incorporated Society of Trained Masseuses, henceforth the Chartered Society of Massage and Medical Gymnastics, on June 26th, at the Langham Hotel, to celebrate the grant to the Society of a Royal Charter. The guests, who numbered some 450, were received by Miss Bliss (the Chairman), Miss Lucy Robinson (founder member), looking very happy, though very tired, and it added to the pleasure of the gathering that five of the original founders of the Society, besides Miss Robinson, were present—Mrs. Dove, Miss Maclean, Miss Manley, Miss Rosalind Paget and Mrs. Palmer—and Miss Templeton, the Secretary, who has worked so capably and indefatigably. A beautiful suite of rooms were crowded, and little parties foregathered over ices, fruit salads, cakes and, of course, tea—tea hot and delicious, such as masseuses, as well as nurses, love.

The musical programme was arranged by Mrs. Robinson-Smith, and the finished and delightful singing of Miss Dorothea Webb, Miss Nina Robinson, Mr. John Adams (tenor) gave unqualified pleasure to all music lovers. Mr. Ulph Smith gave a most clever and amusing musical sketch, "How I obtained the post of organist." The I.S.T.M., which has done such good work in raising the standard of massage and the status of masseuses, is to be congratulated on obtaining the prestige conferred by a Royal Charter, and on its manner of celebrating the event.

A movement is being supported to establish a Club for members of the Naval and Military

Services, and other nurses who have served in Naval and Military Hospitals. The temporary offices are at 35, Mecklenburgh Square, W.C., and the proposal is receiving society and official patronage.

In future the rates of pay for the Ministry of Pensions Nursing Service will be as follows:—Matrons, £115 to £185 per annum; Charge Sisters, £75 to £85; Nursing Sisters, £60 to £65; Assistant Nurses, £25 to £40. War service is counted towards increment in all ranks.

In the House of Commons, on June 17th, Mr. Lyle asked the Minister of Pensions whether alternative pensions are allowed to officers and not to nurses; whether these pensions permit officers to be placed in the same financial position as they enjoyed before the war, plus an increase; if they are thereby benefited more than by the pensions ordinarily laid down, while nurses are not allowed to so benefit; and whether, in view of the feeling amongst nurses generally, he will reconsider the distinction, with a view to a change being made?

Mr. Macpherson replied: Alternative pensions have not hitherto been allowed for nurses by the Royal Pension Warrants. The question of extending the benefits of this class of pension to nurses is at present under consideration, but I am not yet in a position to make any announcement.

June 27th being the anniversary of the death of the Rev. Herbert Aitken, late Rector of Haslemere, who three years ago gave the beautiful house and garden of Coombe Head to the Edith Cavell Fund for a Home of Rest for Nurses, it will interest the 300 who have been guests there to know that special thought for their generous benefactor was included in the services at the parish church, the choir singing Tennyson's beautiful lines, "Crossing the Bar." His grave was covered with a mass of perfect roses, some of which were sent from Coombe Head. Others were distributed to the women of Lambeth by Mrs. Aitken, he having been their rector the latter years of his life. The Aitken Memorial Fund report that £1,220 : 14s. has been collected, and that another £55 : 5s. has been promised. Half of this sum has been sent to Lambeth, while the remainder, allotted to Haslemere, will be sufficient to place a memorial tablet in the church, and, in addition, will go a long way towards purchasing a cottage for the parish nurse. Three generous friends have guaranteed the balance to complete the purchase.

It is gratifying to learn that the memorial is to be another benefit for nurses, for whom he had great sympathy. Nurses who had the pleasure of knowing Mr. Aitken will be glad to know that very nice photographs of him and Mrs. Aitken have been given to Coombe Head, which have been hung in the dining room, so that all future visitors will have a remembrance of the benefactor who "has done what he could" in helping to restore their health for further work.

The fourth issue of *L.T.I.*, the journal of the Leeds Township Infirmary Nurses' League, is to hand. It contains an excellent portrait of Miss F. P. Spann, the President, who, we think, is too modest in the first paragraph of her "Foreword," when she gives as a reason for quite unnecessarily anticipating disappointment upon the part of readers of the Journal, "that the whole responsibility of producing the Journal rests on the gentler sex." For that very reason, in our opinion, its contents will appeal the more to the members of "The Leeds Township Infirmary Nurses' League." What they require in their own League Journal is intimate news of one another, and of their Alma Mater. The world's great events may appear elsewhere!

Miss Spann ends her "Foreword" with a little sound advice to those she has helped to train—and more particularly to those in training—which may be appreciated by a wider circle. She says: "You are getting shorter hours on duty, more recreation—recreation arranged for you—more comfort in the Nurses' Home. All these you deserve, but shall we, who are responsible for your training, get better service? I think so, I am sure we shall. Any woman who takes up nursing is adopting a profession in which she can find occupation for all that is in her. It has been my privilege to know not a few whose work has been just splendid, but there has never been a nurse who was a perfect nurse in the sense that she knew all there was to know about nursing. So work hard, aim at perfection, and do not be satisfied with the second best. Cultivate more and more the spirit of cheerfulness. Everyone of you can remember a time when a cheerful word has helped you to forget a tiring day, and everyone of you can remember when a rebuke, perhaps undeserved, has made you feel very tired indeed.

"Avoid grumbling—one discontented person can lower the spirits of all who come near her, but the cheerful confidence and hopefulness of a good woman will help her patients and fellow workers to keep a good heart through the troublous times they have to face."

## ROYAL BRITISH NURSES' ASSOCIATION.

### ANNUAL GENERAL MEETING.

The Annual Meeting of the Association took place at 11, Chandos Street, on Monday, June 21st, at 3.0 p.m. Mrs. Campbell Thomson occupied the chair. The annual report dealt principally with the events which had led up to the passage of the Registration Bill at the close of the year to which the report referred. In seconding the report, Miss Jessie Holmes said that it showed a splendid record of progress for the profession. Throughout the long struggle the Association had fought clean, aimed high, and hope and truth kept it beyond all fear. Miss Breay said, with reference to the ignoble tactics of the College of Nursing Ltd., in connection with the Central Committee's Bill, that it was no thanks to the Council, that the sick and the nurses were not in the position of having to wait another twenty-five years for State Registration. The Minister of Health had saved the situation by bringing in a Government Bill. Otherwise, it was one chance in very many that a friend of the Bill would, for many years, again have won practically the first place in the Ballot.

The report of the Hon. Treasurer was evidence of the stress of the last months in the battle for State Registration. The expenditure from the general fund had exceeded the income by £50 4s. 8d.; but, in his opinion, the report of the Hon. Secretary had shown how well justified had been the heavy expenditure.

Dr. Stewart warmly acknowledged Miss Macdonald's services. It was due to her persistent care that the financial report was so satisfactory, although they had spent some capital. The money was given for the good of the nurses, and, in the exceptional crisis last year, it was felt that so long as it was there, and was well spent, it must be spent, but it was owing to Miss Macdonald that the reduction in capital was so small. (Applause.)

Miss Beatrice Kent, in seconding the report said there was one part of it which gave her special satisfaction, and that was the fact that it showed that the Royal British Nurses' Association's share in the great struggle of the past year had been financed by the nurses and not by the money of a charitable public. The following were declared elected Members of the Council as a result of the ballot:—

*Medical Men.*—Drs. Wallace Anderson, Henning, Belfrage, Domville, Glover, Lord, Macewen, Outerson Wood, Inspector-General H. Woods, Mr. Murray, and Mr. Openshaw.

*Matrons.*—Misses Bushby, Steuart Donaldson, Dowbiggin, Ford, Hurlston, Little, Murby, Reeves, Vergette, Montgomery Wilson.

*Sisters and Nurses.*—Misses E. M. Ayres, L. Bennett, F. Blakiston, Mrs. Earp, Miss J. Gunn, Miss S. F. Rossiter, Mrs. Stewart, Mrs. Sherliker, Miss J. Stoddart, and Miss F. Wise.

Miss Wise proposed a vote of thanks to the Chair, and the members then adjourned for tea to 10, Orchard Street.

## THE OVERSEAS NURSING ASSOCIATION.

The Annual Meeting of the Overseas Nursing Association is always one of considerable interest, and this year several things combined to enhance its interest—the presence of its Patroness H.R.H. the Princess Beatrice; the fact that it was held by kind invitation of the Duchess of Norfolk in the beautiful rooms of Norfolk House, St. James' Square, S.W., and that a trained nurse, Miss E. M. Pratt, a member of the Association, who has been working in the Uganda Government Hospital since 1914, and who has earned the Silver Bar and Riband presented to Matrons and Nurses on completing ten years and upwards meritorious service for the Association, was amongst the speakers.

### THE PRESIDENT'S SPEECH.

The chair was taken by the President, the Right Hon. the Viscount Gladstone, G.C.B., who congratulated the Association on meeting under such happy auspices. The work had picked itself up during the past year, and 742 candidates had been interviewed against 117 in the previous year, and 213 had been found suitable, as against 34 of last year. The O.N.A. was in touch with every part of the Overseas Empire, and doing work of high value and importance.

Lord Gladstone expressed most cordial thanks to the ladies who on various Committees, especially the Nursing Committee, gave so much time to the service of the Association. He had only one complaint to make, they had not enough money, and they ought to have more. The consciousness of adequate means was a great support. For an Association of such importance to have a subscription list of under £150, was something of a scandal. Even now there were plenty of people who could spare a £5 note. The Council was magnificent on paper, but on going through the names he found 26 absent from the subscription list of people whom he knew could give £1 and upwards. He hoped a vigorous effort would be made to improve the financial position.

He regretted that their hopes of the extension of their work in regard to Canada had not been realised. Their proposals had not met with such support in Canada as they desired. The Dominions liked to take their own way and not opinions from outside; nevertheless he hoped opinion in Canada would mature, and that the ideas put forward by members of the Association would be realised.

Lord Gladstone mentioned with pleasure that eleven nurses had been sent out to South Africa as King Edward Nurses, quite recently, and to the appointment of Prince Arthur of Connaught, as Governor-General. Princess Arthur had given her heart to nursing work in which she had attained practical skill, and he looked forward with anticipation to the help Her Royal Highness would be able to give to the newly-formed movement for King Edward Nurses.

### EXCELLENT WORK OF THE O.N.A.

The adoption of the report, which was taken as read, was moved by Brigadier-General Sir William Manning, K.C.M.G., Governor of Ceylon, who said that during a long connection with the Colonies and Empire, he had seen the excellent work the O.N.A. and its nurses had done. In the early days in Central Africa, there was a good deal of serious sickness, few doctors, and no nurses. The officials were called up to assist in the nursing of their colleagues, but they were untrained, unskilled, and many young men who would have been of value to the Empire would have been alive to-day if trained nursing had been available.

The news that two trained nurses were to be sent out to Nyasaland created something of a panic. Where would they be housed; many of the officials lived in huts? The arrival of the nurses had a marvellous effect in improving the accommodation. They took the work in hand and insisted on a hospital being provided, and officials, planters and others were housed in clean buildings under comfortable conditions. But the nurses also travelled long distances; they might be called up at midnight and go off to a case in a hammock carried by negroes. Their work was wonderful. But they suffered serious losses. Not from the climate, or the conditions of work, but the Government of the Protectorate was in danger of becoming a matrimonial agency. It was embarrassing, and he called the attention of the O.N.A. to this. But the nurses were excellent, and when they married, they carried their knowledge into the out-districts.

### HIGHEST PRAISE THE DUE OF THE NURSES.

He could speak from personal knowledge of the work of the O.N.A. nurses in Central Africa, East Africa, the West Indies, and elsewhere. They were a credit to the institutions which had raised them, and to their profession. Amongst them were women who had done as much as any Colonial Minister high or low. Their names were unknown, their works and deeds unsung, but they were able by their skill, courage, and devotion to duty, to save men who, but for them would have passed away. He would not be there to-day but for the skill and care given to him. The nurses of the O.N.A. were a wonderful, devoted, skilled body of women, and the highest praise which could be given them was none too great.

### A PIONEER MEMBER TELLS A MOVING TALE.

Miss E. M. Pratt, who seconded the adoption of the Report, and has been a member of the Association for 20 years, during which she worked in Costa Rica, Sierra Leone, Bangkok, Cyprus, and now Uganda, said that the work in each was very different. In Sierra Leone she worked with a black doctor, and for staff had orderlies and black nurses. When asked by a high official who visited the hospital, whether there was anything she wanted, she replied that the hospita

badly wanted a staircase, and they had been hoping that he would fall down on the existing one. They got their staircase. In Bangkok they had paying patients in a private nursing home, many being bad cases of typhoid, as the water supply in the compounds was what Chinamen had washed in.

Then there were many insects and bad cases of malaria as mosquitos bred in the swamps, and the water on the rice fields. In Cyprus there were many accident cases. The Greeks were free with their knives and stabbing was often the result.

In Uganda where she had been for the last five-and-a-half years they had a nice hospital, and the patients were mostly officials and planters. To go about at night was rather adventurous, as there were snakes about and sometimes leopards, but there was plenty of labour, and the natives were very clever at killing snakes, so a black boy with a lamp went on ahead.

Young men and women going out to Uganda were thankful to know that they could be nursed if they were ill. Not infrequently she had thirty patients with temperatures of 105½ and 106 deg. in the evening. The natives were a real help in nursing, and many a young man owed his life to the care of natives.

Miss Pratt urged the necessity for the best nurses in overseas work.

#### NOTE OF WARM APPRECIATION.

The note of warm appreciation of the work of the nurses was struck by Mr. Gershom Stewart, M.P., who moved the re-election of the retiring members of the Executive Committee and the Hon. Officers. Health, he said, was priceless, and he told the story of an old gentleman, who, when asked whether he would rather be a healthy knave or an ailing saint, replied: "You should not put such an alternative before me."

The speaker told of the recrudescence of plague in Hong Kong, and said that the magnificent services rendered by the nurses, some of whom, alas, succumbed to the disease, was beyond all praise. They had left an indelible memory and example for those who came after.

In regard to funds. If the Association wanted money it could get it. Nurses might be angels but they were also human beings, and they ought to live comfortably, have sufficient to live upon and to enable them to subscribe to a Pension Fund. They liked to be free and independent women.

The proceedings concluded with votes of thanks to the Princess for her presence, and to the Duchess of Norfolk for the use of the house, after which tea was served in an adjoining room. We commend this Association's imperial work to patriotic people, and also to our very best nurses. Both should find satisfaction in supporting it. M. B.

The representative body of the British Medical Association last Saturday passed a resolution deprecating the voluntary disclosure of professional secrets without the patient's consent.

## COLLEGE CONFERENCE.

The Conference convened by the College of Nursing, Ltd., and held on the evening of June 17th and the morning of June 18th, at the Royal Society of Medicine, 1, Wimpole Street, W.1., dealt with two subjects, "How to attract the most suitable women to the Nursing Profession," and "District Nursing."

#### ABLE SPEECH BY DR. JANET LANE-CLAYPON.

The best speech of the Conference was undoubtedly that of Dr. Janet Lane-Claypon, Dean of the Household and Domestic Science Department, King's College for Women. She clearly showed that the underlying principles governing the nursing profession applied to most professions, and not exclusively to our own. Those who had studied the history of professions would know that the women who first entered them were of outstanding character, above the average, the work was hard, and the inducements were few. They opened the door, and then the average women came in. Then, unless a profession put up a fairly high standard it fell into disrepute. Most of those opened to women were already organised by men, and they, therefore, had to reach the average standard already set, but, so far, nursing education had not been standardised, and a standard had yet to be defined in relation to three points, the standard of admission, the standard of training, and the outlets after training. It was useless to define one without paying attention to the others.

The standard of admission was very important; there should, she thought, be an entrance examination, and a fairly high standard should be put up. It was a curious feature of human nature that if a thing was made difficult people wanted to do it. If it was made easy, they would not look at it. Exception was sometimes taken to examinations, but what could they be replaced by? You could not ascertain otherwise what a person might have of intelligence. She considered that those admitted to the entrance examination should have been educated up to 18 years of age, or they would not have learnt how to work, and how to take things in, and you would not therefore, be able to develop the profession along professional lines. The question of training overlapped with that of outlet, and in defining the training, future outlooks should be considered.

Dr. Lane-Claypon considered that neither the medical, nor the nursing professions, have so far laid sufficient stress on preventive work, and that very few members of either knew anything about the normal baby. If these subjects, together with social economics and general sanitation, were studied when a girl left school, the gap before she entered a hospital for training would be filled up, and a course might be arranged, covering the whole period, which would be recognised as qualifying for Health appointments

for which there would be many openings in the future, without further training.

**"STEALING THE THUNDER" OF THE SUPER-WOMEN.**

The Chairman at the Evening Session was Dr. J. Kay Jamieson, Dean of the Medical Faculty Leeds University, who said that six years ago he knew nothing of the nursing profession, and he was there not to give but to get information—but he fell in charge of a big war hospital, where he met a large number of nurses. For a short time after that the Nursing Profession had no organisation, then the College of Nursing was founded, which would exercise the same functions in relation to Nursing as the General Medical Council did to Medicine.

When discussion was invited at the close of the speeches, the last person to speak was Miss Margaret Breay, who said that the Chairman in his opening remarks had said that he had come to get information, and she had been waiting for a member of the College of Nursing, Ltd., to inform him of the existence of other Societies before the College was founded in 1916. She was sorry it devolved upon one who was not a member of the College to do so.

The British Nurses' Association was founded in 1887 by some of those super-women of whom Dr. Lane-Claypon had spoken. It received the title of Royal in 1892 and a Royal Charter (the most honourable form of incorporation possible to obtain) in 1893.

She also referred to the work of the Society for the State Registration of Trained Nurses which drafted the first Nurses' Registration Bill in this country in 1904, secured an unanimous report in favour of State Registration of Nurses from a Select Committee of the House of Commons in 1905, and the passage of its Nurses' Registration Bill through the House of Lords in 1908. It would be more just, she did not say generously, but just, if the College of Nursing acknowledged that these Societies had not only been in existence but had been forceful enough to do all this work before the College of Nursing was founded.

**THE GENERAL NURSING COUNCIL THE GOVERNING BODY OF THE NURSING PROFESSION.**

Again, the Chairman of the meeting had said that the College would be charged, in regard to Nursing, with the functions assumed by the General Medical Council in regard to Medicine. That was not the case.

The duties analogous to those performed by the General Medical Council had been placed by Parliament on the General Nursing Councils established by the Nurses' Registration Acts.

**RED HERRINGS.**

Sir Arthur Stanley, referring in the course of proposing a vote of thanks to the Chair, to Miss Breay's remarks, did not attempt to answer or controvert them, but said that the College of Nursing had approached the Royal British Nurses' Association in regard to Amalgamation as the Royal British College of Nursing, but for reasons which seemed

good to the Association, which he had never been able to understand, it had withdrawn from the negotiations. He considered the organised societies of Nurses should publish the names and addresses of their members as the College of Nursing had done. He concluded by congratulating those present on having had a "rollicking evening."

We are used to the College of Nursing usurping credit for the work of the nurses' self-governing societies, but when it permits the functions of the General Nursing Council to be publicly assigned to it without disavowal, it is a serious matter, especially as an obsequious Press circulates these inaccurate statements. If individual members of the General Nursing Council (and several were present in the room when this was done) do not correct misstatements in this connection, an appeal might well be made to that Council for an official pronouncement.

**THE GUY'S NURSES' LEAGUE COTTAGE.**

The Guy's Hospital Nurses' League gave a very pleasant garden party at Honor Oak Park on Wednesday, June 23rd, when the extension of the Nurses' Cottage, which was given to commemorate the work done by Guy's Nurses both at home and abroad during the war, was opened by Lord Revelstoke and Mr. Cosmo Bonsor. The initial ceremony was performed by Lord Revelstoke, who rang the front door bell. The Matron, Miss Margaret Hogg, C.B.E., opened the door and bade him welcome in the name of all Guy's Nurses. The guests gathered on the verandah, and Mrs. Lauriston Shaw, the first Hon. Treasurer of the Nurses' League spoke, and recalled the small beginnings from which the present membership of over 1,600 Nurses had sprung. She asked Lord Revelstoke to declare the Cottage open. Lord Revelstoke, in passing, paid a warm tribute to all those Nurses who served their country untiringly during the late war, and to the memory of whose work the new extension is dedicated. Mr. Cosmo Bonsor spoke of the real pleasure it always gave him to add to the comfort and relaxation of the Nurses with whom he had been associated for so many years.

The Matron gave the very warmest thanks of the Nursing Staff to both Lord Revelstoke and Mr. Cosmo Bonsor for their unflinching kindness and generosity. A bouquet of pink carnations was presented to Mrs. Cosmo Bonsor.

Tea and strawberries were served in the grounds and indoors to the large number of guests, Sisters and Nurses present. There was music on the verandah and a tennis tournament in progress on the hard court. Everyone seemed as happy as could be.



## THE NURSING CONFERENCE.

At the Conference which took place at the Royal Horticultural Hall, Westminster, S.W. 1, on Wednesday, June 23rd, the chair at the first afternoon session was taken by Miss Bradley, Matron of the Brook Hospital, Shooters' Hill.

### STAFFING DIFFICULTIES IN SMALL HOSPITALS.

Miss Ind, of Stratford-on-Avon, spoke on the difficulties of the smaller hospitals in obtaining probationers and moved that some scheme of application should be drawn up whereby there should be co-operation between the large and the small hospitals, in order that time spent in the latter should be taken account of. A discussion took place later and after this it was put from the chair and carried that the following resolution be sent up to the General Nursing Council.

"This meeting of the Nursing Conference desires to call the attention of the General Nursing Council to the present unsatisfactory position of the small and special hospitals which cannot offer a full certificate to their probationers, and respectfully urges the Council to consider, when framing the regulations for the admission to the Register, the need for a scheme of affiliation between such hospitals and the larger schools."

### FEVER NURSING AT HOME AND ABROAD.

Dr. Muller read a paper on "Fever Nursing in India," and what struck her audience was the enormous difficulties which existed for those engaged in this particular branch of nursing in India compared with the splendid arrangements at the Fever Hospitals in England.

### THE FUTURE OF NURSING AND LIVING OUT.

Mr. Frank Briant, speaking on the living-out system for nurses, emphasised the necessity for making nursing a more attractive profession than it was at the present time. The deterioration in the class of women entering the profession was to be regarded as a national disaster. He gave the reasons which he regarded as responsible for such falling off, and said that they had proved at Lambeth that the living-out system attracted a better class of women. The only hope of getting educated women into the profession was to do away with the wicked hours and the very grinding work which had been the rule in the past.

### THE TRAINED NURSE IN PUBLIC HEALTH WORK.

When the Conference reassembled at 5 o'clock the Chair was taken by Mrs. Paul, and the first speaker was Miss C. Margaret Alderman, who, in dealing with the progress of the trained nurse in public health work said it was necessary to take a short survey of the history of public health nursing. For the first few years no definite qualifications were laid down for public health appointments, then, as local authorities developed one or more branches of the work, they found that the most useful qualifications were three

years' general training, the certificate of the Central Midwives Board, and the certificate of the Royal Sanitary Institute.

As the work developed still further, local authorities became more progressive—especially during the war. Medical Officers of Health found from the working of their own Health Departments that trained nurses were the most efficient for the work, and the majority of these Officers and Health Committees laid down three years' general training as a minimum qualification.

Then the more progressive authorities required their Health Visitors to hold the certificates of the Central Midwives' Board and Royal Sanitary Institute in addition, and this standard was now required by all the best borough and county councils.

Stress had been laid on the fact that education was a great factor in public health work. This was so, but it must be of the right sort. The education of a Health Visitor was not the same as that required by a scholastic teacher. The Health Visitor had to teach people to carry out the laws for the prevention of disease; to do this she must have a knowledge of the symptoms of the diseases she was out to prevent, and of the men, women and children suffering from these diseases; therefore, training in the wards and outpatient department of a hospital was more suitable, and more thorough than that obtainable in a polytechnic or an university. You were not qualified to teach prevention by listening to a course of lectures, or by standing about a Welfare Centre or a Tuberculosis Dispensary.

Unfortunately the Ministry of Health allowed themselves to be dictated to by a body of amateurs instead of studying their own Health Departments. They drew up regulations first, and sent inspectors round afterwards, and in consequence drew up regulations which could never be put into practice without causing the Ministry of Health to lose the respect of the people.

The regulations proposed that a girl of twenty should act as a Health Visitor, providing she had had two years' training at a polytechnic, and that a graduate with one year's training should be recognised as a Health Visitor.

The girl of twenty should be ruled out of public health; she ought to be training as a nurse, or a teacher, or doing domestic work.

It was an absolute insult to send a girl of twenty (in the capacity of Health Visitor) to the mother of an infant, or a school child, or a tuberculous soldier, and it was nonsense to spend public money on salaries for girls of that age.

By laying down the general principle of three years' training, and selecting nurses with special experience in addition, preventive work would be helped on tremendously and medical officers would be supplied with qualified assistants.

Miss Alderman concluded by appealing to those interested in the question to uphold the ideal that one must serve one's country by training in hospital before assuming the position of a teacher in preventive work. They would have

to sweep away camouflage, which was a product of the war, and get down to the basic rock of sacrifice, but she felt confident that if our Ministry of Health would adopt that course our Public Health Service would become like our British Nursing Service—the finest in the world.

Miss Eleanor Barton suggested that nurses gained a very intimate knowledge of the very poor in poor law infirmaries, and Miss Alderman agreed, but said, "The Ministry of Health does not recognise our poor law. The Ministry hasn't the sense to utilize that training."

In reply to a question as to the age limit for Health Visitors, she elicited applause by expressing the opinion that it was as long as you are fit for work.

Various nurses at the back of the hall asked questions as to what "the women of the educated and cultured classes" were to do at twenty years of age.

Miss J. H. Macdonald (Registered Nurses' Society) proposed that nurses should make a start here and now, and should have done with the unskilled (whether cultured and educated or not); let the women with the best brains, the best hands and the best skill have the best chance. (Applause.)

#### THE PROFESSIONAL UNION OF TRAINED NURSES.

Miss Maude MacCallum, the next speaker, said that the first and crying need of the nursing profession is to organise. It was the duty of every nurse to belong to some organisation—to the Professional Union of Trained Nurses if she felt so inclined.

The Professional Union of Trained Nurses differed from every other society of nurses in England, Scotland and Wales in being registered under the Trades Union Acts. This necessitated its being governed entirely by its members. The Labour clauses of the Peace Treaty between the Allied and Associated Powers and Germany stated that the High Contracting Parties agreed "to the right of Association for all lawful purposes by the employed as well as by the employers." Now that Trade Unionism was recognised by international law it seemed futile for associations of employers to fight against it. Members of a trade or profession should band themselves together to protect their own special interests, and to protect the weak amongst them from being trampled on and crushed. She invited them to join the Professional Union of Trained Nurses (17, Evelyn House, 62, Oxford Street, W.1), and to do it now.

Questioned on the subject of strikes, Miss MacCallum said the Union had no Strike Clause. Strikes were out of fashion, and Arbitration was now the recognised method of settling differences.

#### HOURS OF PRIVATE NURSING.

Miss Sheldon, in the absence of Miss Bremner read her paper on "Hours of Private Nursing," on which there was quite a brisk discussion.

## HONOURS FOR NURSES.

His Majesty the King held an Investiture at Buckingham Palace on June 25th, and bestowed the following Orders and Decorations on nurses;—

#### THE MOST EXCELLENT ORDER OF THE BRITISH EMPIRE.

*Military Division.*—Miss Mary Stewart, Q.A.I.M.N.S., Commander.

#### BAR TO THE ROYAL RED CROSS.

Miss Elizabeth Wilson, T.F.N.S.

#### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Amy Fielding, Miss Alice Gilmore, Miss Katharine Lowe.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Elizabeth Downie, Miss Mabel Hobhouse, Miss Janet Livingston.

#### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Jean Crawford, Miss Rose Davy, Miss Annie Falconer, Miss Louisa Fox, Miss Louisa Hanson, Miss Ellen Harris, Miss Mary Linton, Miss Millicent Perry, Mrs. Georgina White.

*Territorial Force Nursing Service.*—Mrs. Gwendoline Arnold, Miss Julia Comyns-Berkeley, Miss Emilie Cottle, Miss Esther Farmer.

*Civil Nursing Service.*—Miss Aimée Densham, Miss Jane Hammick.

*British Red Cross Society.*—Miss Helen Anderson, Mrs. Gertrude Clenshaw, Miss Marjorie Hamilton-Dalrymple, Mrs. Ethel Darley.

*Civil Hospital Reserve.*—Miss Ada Rushforth.

*Civil and War Hospitals.*—Miss Ellen Clarke, Miss Ethel Forster, Miss Elizabeth Gordon.

*Voluntary Aid Detachment.*—Miss Grace Currie, Miss Katherine Evans, Miss Dorothy Field, Miss Catherine Forrestal, Miss Gwendolen Glossop, Miss Silvia Glossop, Miss Margaret Greatorex, Miss Mary Hudson, Miss Olga Nethersole, Miss Kathleen Roberts.

#### THE MILITARY MEDAL.

Miss Edith Hounslow, V.A.D.

Queen Alexandra received at Marlborough House the members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross and the Military Medal, subsequent to the Investiture at Buckingham Palace.

Miss A. B. Smith, R.R.C. (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service), was also received by her Majesty.

## THE PASSING BELL.

By the tragic death of the Countess of Dudley, drowned while bathing on the Connemara coast last Saturday, the sick poor of Ireland have lost a warm friend, with a genius for kindness and discriminating helpfulness. Lady Dudley realised the need for trained nurses in the outlying districts of the West of Ireland, and in making provision for this necessity insisted that the nurses should possess the qualifications of fully trained Queen's Nurses. She was one of those who used the opportunities of her high position to benefit humanity, and can ill be spared.

## APPOINTMENTS.

### MATRON.

**Sheffield Works Convalescent Home, Matlock.**—Miss Mary Helen Cotter has been appointed Matron. She was trained at the Royal Infirmary, Sheffield, where she subsequently held the position of Ward Sister.

**Samaritan Hospital, Belfast.**—Miss Emily J. Matthews has been appointed Matron. She was trained at the Royal Victoria Hospital, Belfast, and has had experience of private nursing.

### SISTER.

**General Hospital, Hereford.**—Miss Agnes Gummer has been appointed Sister. She was trained at the North Staffordshire Infirmary, Stoke-on-Trent, and has been Staff Nurse in the X-ray department.

**Royal Hants County Hospital, Winchester.**—Miss Margaret Miles has been appointed Sister. She was trained at the Royal Infirmary, Gloucester, where she held the position of Sister, and has also been Night Sister at the Birmingham Eye Hospital.

### NIGHT SISTER.

**Stamford and Rutland General Hospital.**—Miss O. B. Nightingale has been appointed Night Sister. She was trained at the General Hospital, Northampton, where she also acted as Sister.

## THE GENERAL MEDICAL COUNCIL AND THE NURSES' ACT.

Sir Donald MacAlister, K.C.B., President of the General Medical Council, stated in his Presidential Address on June 1st, that acting on the instructions of the Council he was enabled by the courtesy of the Lord President to call the attention of the English Minister of Health to an apparent omission in the Nurses' Registration Bill introduced by him. No provision was made, as in the Midwives' Acts, for communicating the Rules framed by the General Nursing Council to the Executive Committee before approval by the Minister.

Dr. Addison considered the point, but decided that such a provision was in this case unnecessary as the rules in question do not purport to "regulate the practice" of nurses, but deal mainly with details of administration. Moreover such rules have, unlike those for midwives, to be laid before Parliament prior to approval. The Minister, accordingly, did not favour any amendment of the Bill in the sense suggested, and the Lord President concurred in his view.

## THE HOSPITAL WORLD.

From this week all adult patients at the London Hospital who can afford it will contribute a guinea a week towards their expenses. It is hoped that £20,000 a year will thus be secured.

The National Hospital for the Paralysed and Epileptic in Queen Square is now closed, but the Out-Patients' Department remains open.

It is not improbable that the London Fever Hospital will have to close its doors.

## HOURS OF EMPLOYMENT BILL.

The Nurses' Organisations are not entirely at one on the question of the 48-hour week for nurses.

### THE ROYAL BRITISH NURSES' ASSOCIATION.

We gather that the Royal British Nurses' Association favours a 48-hours' week for nurses working in hospitals and institutions, but thinks it would not be for the benefit of nurses in private practice to adopt such a time table, as there is often no one to relieve them with safety to the patient, and that the result would be that the patient could not receive efficient care, and the public would, in many instances, cease to employ a trained nurse, substituting cheaper help, greatly to their own detriment.

### THE PROFESSIONAL UNION OF TRAINED NURSES.

The Professional Union of Trained Nurses, on the other hand, considers that all nurses, including private and district nurses, should come under the "Forty-eight Hours Bill."

It proposes:—

(1) **INSTITUTION NURSES.**—(a) and (b) With regard to institution nurses, the ideal way of carrying out this scheme is in eight-hour shifts. As the forty-eight hours working week is in operation in several State-aided hospitals, it must be a workable scheme. Voluntary hospitals may object on the score of expense, and prefer the twelve-hour shift; in that case, if trained nurses were asked to do only skilled work, and better ward maids or ward orderlies were employed, four hours off duty each day and one day off a week could be managed; extra domestic workers need not be housed in hospital, and thus extra accommodation would not be necessary; a large army of women already trained as hospital orderlies are already available. (c) A twelve-hour shift will probably be found more workable in nursing homes. As in hospitals and infirmaries, if better domestic help were employed, nurses need only do skilled work, and thus be able to have four hours off duty each day.

(2) **DISTRICT NURSES.**—(a) (b) (c) If every nurse in charge of a district had at least one trained nurse pupil working with her, a forty-eight hour week could be arranged.

(3) **PRIVATE NURSES UNDER CONTRACT.**—To remain on duty as long as is necessary for patients' welfare, and to be paid overtime for hours over and above forty-eight per week.

### THE COLLEGE OF NURSING, LTD.

The College of Nursing, Ltd., has drawn up the following scheme, and sent it to the Ministry of Labour, recommending that nurses—excepting maternity nurses, shall work for 56 hours a week; that is, an eight-hour day for seven, instead of six, days a week.

### SCHEME SUGGESTED BY THE COLLEGE OF NURSING TO BE INCLUDED IN A SPECIAL ORDER.

1.—That all Registered Nurses and other persons actually engaged in rendering services in direct connection with the nursing of the sick, excepting maternity nurses, be included in the provision of the Special Order.

2.—That for nurses in institutions for the sick, including those where probationers are in training, for nurses in District Nursing Institutions, and those employed by District Nursing Associations, and for nurses engaged in Public Health Work, the maximum working hours be 56 per week, taken over a period

of 4 weeks, the time on duty not to exceed 10 hours in 24 hours. Any time worked in excess of the maximum to be compensated by extra off duty, given during the nurse's normal working hours, and if extra off duty time due to the nurse exceeds 48 hours, board and residence to be provided, or the monetary equivalent, if preferred by the employer.

3.—That the Institutions for trained nurses on the co operative system, and other Institutions supplying nurses for private cases and in Nursing Homes, the maximum working hours be 56 per week, taken over a period of 14 days; any time worked in excess of this maximum to be compensated by the same number of hours given as extra off duty during the nurse's normal working hours, and the nurse to receive, in addition, the fee due from the patient for the extra time worked by her, together with board and residence, or the monetary equivalent, if preferred by the employer.

In a recent correspondence in these columns the almost unanimous opinion expressed by nurses was for a 48 hours' week in hospitals and institutions, but freedom of contract between private nurses and their patients.

### OUTSIDE THE GATES.

In the House of Commons on June 3rd, Sir J. D. Rees (Nottingham, E.) asked the Minister of Health what has been the result of the consideration given to the question whether a County Council could properly and legally provide hospitality for children of foreign nations at the expense of the ratepayers?

Dr. Addison replied "I am advised that there is no legal authority under which a County Council can incur expenditure for this purpose."

That is sound sense as well as sound law. Let those who desire to bring the children of enemy aliens to this country bear the cost. It is most unjust that it should be defrayed out of public funds, and is in many instances conscientiously and indignantly objected to by ratepayers.

### COMING EVENTS.

July 2nd.—Colindale Hospital, The Hyde, Hendon, N.W. 1. Unveiling of the Memorial to Hendon Nurses in the Nurses' Home. Tea. Meeting of the Nurses' League.

July 3rd.—League of St. Bartholomew's Hospital Nurses. General Meeting, Clinical Theatre, St. Bartholomew's Hospital. 2.30 p.m. Social Gathering. Great Hall. 4 p.m.

July 14th.—Presentation of Prizes to the Probationers trained at St. Marylebone Infirmary, by the Mayor of St. Marylebone. Reception at the Infirmary, St. Charles Square, W. 3 p.m.

July 19th.—National Union of Trained Nurses. Lecture, "Unemployment Insurance," by Miss Florence, Secretary, Women Clerks and Secretaries' Friendly Society, 46, Marsham St., S.W. 7 p.m.

### A WORD FOR THE WEEK.

POURQUOI NON ?

Cet animal est très méchant  
Quand on l'attaque il se défend.

### LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

#### NATIONAL UNION OF TRAINED NURSES. THE N.U.T.N. AND THE P.U.T.N.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The unfortunate similarity of the two names and abbreviations is causing a very general confusion, I therefore write to point out that the National Union of Trained Nurses is *not* a Trade Union and has no connection with the Professional Union of Trained Nurses, the newly-formed Trade Union.

Yours faithfully,

M. L. RIMMER,  
Hon. Organising Secretary.

[The same confusion arose between the long-established National Council of Trained (Registered) Nurses, and the Nurses' Social Union, when the latter assumed the title of National Union of Trained Nurses, but as the former has now dropped the word "Trained" and retained "Registered" in the future less confusion will arise. There is no doubt many nurses do not understand modern trades unionism, and they will be some time before they will as a class take the trouble to study its ethics and objects, arbitration, and not the strike, being now its chief policy between employer and employed. The National Union of Trained Nurses' 46, Marsham St., Westminster, has a niche all its own in the nursing world, and being entirely self-governing commends itself to many thoughtful nurses.—ED.]

#### SUGGESTIONS FROM NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—May I point out that the question paper set for May 1st required competitors to send in proposals for organising (1) an eight-hour day for nurses in hospitals; and (2) how to organise a forty-eight hour week for nurses; not either one or other, as suggested by the comment in the number for May 8th. If this question were divided, I am sure many proposals would be sent in, but the two together form rather a large subject to be discussed in not more than 650 words. The eight-hour day seems to me impracticable, whereas a forty-eight hour week is most desirable. Yours truly,

A. M. DOUGLAS.

University College Hospital,  
Gower Street, W.C.

[We shall be pleased to receive suggestions from nurses how best to organise either a forty-eight hour week—or an eight hours' day—for nurses' work. The number of beds per ward must be given.—ED.]

### KERNELS FROM CORRESPONDENCE.

*Old-fashioned Sister*: "There appears to be a callous spirit around, jeering at philanthropic impulses, and I do mark less tenderness and compassion in many of the nurses and probationers sent to my ward. But let me be fair. Of course, in looking back there were hard, unsympathetic women in the good old days; perhaps it is in these days I miss the Saints! I read a delightful article in the *Times* last week headed 'Compassion: Works of Mercy' (I wish the modern nurse read good stuff.) To quote a bit:—

"There are many ways in which men deal with what is called the problem of pain. It is best approached by unaffected response to the impulse of sympathy which the sight of suffering evokes in our hearts. Then it will be found that it is through the sorrows of the world that the purest joys are found, not only in the relief which comes to the sufferer, but also in the fullness of life attained by those who render him the service of their works of mercy. It is in this service that we learn best how the world is kept by sorrow from falling into corruption, and how the presence of pain brings its own moral strength to humanity. Blake's poem, 'The Two Songs,' expresses this fact with the weird force of his strange genius.—

I heard an Angel singing  
When the day was springing;  
"Mercy, pity, and peace  
Are the world's release."  
So he sang all day  
Over the new-mown hay,  
Till the sun went down,  
And haycocks looked brown.

I heard a devil curse  
Over the heath and furze;  
"Mercy could be no more  
If there were nobody poor,  
And pity could no more be  
If all were happy as ye;  
And mutual fear brings peace.  
Misery's increase  
Are mercy, pity, peace."  
At his curse the sun went down  
And the heavens gave a frown."

### THE REGISTERED NURSES' PARLIAMENTARY COUNCIL.

*Miss J. B. N. Paterson, West Kilbride, N.B.*: "Re the suggested formation of the Registered Nurses' Parliamentary Council, is it suggested that this Council limits its activities to England, or is it prepared to act in Scotland and have Scottish Council members? The long distance will, of course, be a trouble, and the chance of being in the minority, and Scottish people 'aye regard thae English wi' suspencion,' and not without cause! (not so far as the bawbees are concerned.—ED.) The idea seems good, yet the P.U.T.N. seems fairly on the watch up here. I should like to hear other nurses' views on this project. And the subscription—another guinea! Nurses are not made of them, and why should 10s. 6d. be devoted to the subscription to the *JOURNAL* when at present we pay 6s. 6d.? The Political Enfranchisement of

Nurses and Rank for Service Nurses have my warmest support."

[As we announced in the report of the recent meeting when the "Registered Nurses' Parliamentary Council" was formed, membership will be open to Registered Nurses and no restriction as to locality is contemplated. Thus every nurse, male and female, registered by the Nursing Councils of England, Scotland or Ireland will be eligible to join. But it is not contemplated for the future that a few nurses shall sacrifice their entire time and pay the cost of protecting the whole profession. Now that Nursing is a Profession it must rise to a certain degree of dignity, and no longer be content to be *done for*. Each member should pay a moderate fee for advancement and protection. This is a lesson registered nurses must learn. Self-support means self-government, and there is no chance of either without a free organ in the Press. The subsidised Press is the bought Press, always commanded by the employer, and the workers' journals for the future must aim at meeting the huge cost of production; this they can do by a little self-sacrifice. We are glad to know that Political Enfranchisement and Rank for Service Nurses have Miss Paterson's warm approval. We hope she will open up the demand for them in Scotland. Parliamentary propaganda needs much time, special gifts of persuasion and experience; that is our reason for advocating a Parliamentary Council. It is also costly, and that is the reason why all must share the burden. Be sure that cadging means economic servitude, and that it is only advocated by those opposed to individual independence. All information re the Registered Nurses' Parliamentary Council will soon be obtainable from the Hon. Sec., 431, Oxford Street, London, W. 1.—ED.]

### DEMORALISING AND BARBAROUS.

*Miss G. Simpson, Nottingham*.—"Can you do anything to prevent the right of schoolmasters to thrash (caning they call it) school girls? It is most demoralising and barbarous. I know a case in which a girl of thirteen, suffering with violent headache at a certain period, was thus molested. It has apparently had a very disastrous effect upon her temper. Formerly a bright, mischievous child, she now suffers from fits of morose rage, and cannot forget the degradation. Her mother is most anxious about her. 'Some of these days she'll do him an injury,' is what she fears. You cannot *beat* sense into girls, but they usually respond to personal sympathy."

### OUR PRIZE COMPETITION.

#### QUESTIONS.

*July 3rd*.—What are the causes of swelling of the legs (1) during pregnancy, (2) after labour? How would you deal with such cases?

*July 10th*.—What do you understand by anti-typhoid inoculation? What is its value? Mention the principal abdominal complications of enteric fever, and state how they should be treated?

# The Midwife.

## NATIONAL BABY WEEK,

JULY 1st-7th, 1920.

### MESSAGE TO THE NATIONAL BABY WEEK COUNCIL FROM H.M. THE QUEEN.

"I note with pleasure that the National Baby Week Council enters upon its fourth year of work on July 1st. I have followed with much interest the work of the Council, of which I am Patron, and I send my earnest wishes for its future success. —MARY R."

There will be no central celebrations in London this year, but celebrations are being held all over the United Kingdom. Information as to the hours at which visitors are welcome at Day Nurseries in or near London may be had from the Secretary, National Society of Day Nurseries, 20, Berkeley Street, W.1. (Phone Mayfair 2100); the hour at which centres are open may be had from the National Baby Week Council, 27a, Cavendish Square, W.1. (Phone Mayfair 2977).

### NATIONAL MOTHERCRAFT COMPETITIONS.

Display of articles sent in for the Competitions at Cosway Street L.C.C. Schools, W.1, Saturday, July 10th, 3 to 5. Entrance 6d.

## CENTRAL MIDWIVES BOARD.

At the Monthly Meeting of the Central Midwives Board, held at the Board's Offices, Queen Anne's Buildings, S.W.1., the question of a representation to the Ministry of Health with regard to modifying the Constitution of the Board was considered, and in connection therewith a letter was read from the Ministry of Health. The Board agreed that a representation be made to the Minister of Health under Section 1 (1) of the Midwives Act, 1918, that it is expedient to modify the Constitution of the Board as indicated by the Memorandum now approved by the Board and signed by the Chairman. The following is the Memorandum referred to:—

### MEMORANDUM.

(NUMBER OF REPRESENTATIVES, 14.)

Four persons appointed by the Minister of Health, of whom two shall be certified midwives, on the English Midwives Roll.

Four registered medical practitioners appointed as provided by the Midwives Act 1902 Section (3) 1.

Two certified midwives on the English Midwives Roll appointed by the Incorporated Midwives Institute.

One person appointed by the Queen Victoria's Jubilee Institute for Nurses.

One person appointed by the Association of County Councils.

One person appointed by the Association of unicipal Corporations.

One person appointed by the Society of Medical Officers of Health.

PROVISO.—Notwithstanding anything herein

contained to the contrary the number of midwives on the Board shall at no time exceed five.

### EXCLUSION OF REPRESENTATIVE OF ROYAL BRITISH NURSES' ASSOCIATION.

It will be noticed that in the proposed constitution of the Board the Royal British Nurses' Association, which has had representation on the Board since its formation in 1902, is eliminated. This would exclude representation of trained nurse-midwives qualified to supervise maternity hospitals, homes, and wards.

We observe with satisfaction that the Board recommends the appointment of four certified midwives on the re-constituted Board. The present constitution of the Board does not secure one seat to a midwife, and to organise a profession without representation of its members on its governing body is an obsolete method which requires drastic re-organisation.

We wish, however, that the Central Midwives Board had recommended that the certified midwives should elect their own direct representatives, as the registered nurses are to do, instead of disfranchising all who are not members of the Midwives Institute, and we most thoroughly disapprove of the proviso that the number of midwives on a Board of fourteen members shall at no time exceed five, firstly because nominating bodies should not be limited in their selection, and secondly because the midwives ought to be in a majority on their governing body. We hope, therefore, that due weight will be given to these points before the new constitution of the Board is adopted.

At the same meeting the Board approved a scheme providing for a course of forty hours' instruction in one week for approved teachers, and those desiring to be approved teachers, drawn up by the Midwives Institute, and resolved to notify the London County Council of such approval with a view to an education grant being made in support of the scheme.

We wonder what proportion of such intensive instruction will be retained after a short time by its recipients. However, the proposition is an "opening wedge," and we hope that the scheme will be developed so that aspirants for approval as teachers may have a course of practical training in teaching under instructors versed in educational methods—we could mention midwives eminently qualified to give such instruction—and be required to give a practical demonstration of their ability to teach, before appointed representatives of the Board, prior to receiving its approval as teachers.

## THE MIDWIFERY CONFERENCE.

Several very interesting addresses were given at the Midwifery Conference at the Royal Horticultural Hall last week, to which we hope to refer in a future issue.



# THE BRITISH JOURNAL OF NURSING

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Vol. LXV

## EDITORIAL.

### THE ERADICATION OF VENEREAL DISEASE.

On Friday, July 2nd, Dr. Addison, Minister of Health, received a representative deputation from the Society for the Prevention of Venereal Disease. The deputation, which was introduced by Lord Willoughby de Broke, presented the following resolution, passed unanimously at the recent annual meeting of the Society :—

That inasmuch as the Ministry of Health has failed, and public bodies (including the London County Council) have declined, to provide the means of delayed disinfection against venereal disease at ablution centres, this meeting calls upon the Ministry of Health and upon local authorities to instruct all qualified chemists to sell such means of immediate self-disinfection against venereal disease as may be approved from time to time by the Ministry of Health or by medical officers of health.

Captain W. E. Elliot, M.P., Dr. Sequeira, Sir Archdale Reid, Mr. H. Wansey Bayly, Dr. Mearns Fraser, Sir W. Arbuthnot Lane, Sir James Crichton Browne, and Dr. Saleeby were the speakers.

### TO AVOID CONTAGION, AVOID CONTACT.

Lord Willoughby de Broke urged two lines of defence against venereal disease; firstly, that "if you wish to avoid contagion, you had better avoid contact," and secondly, the immediate self-disinfection of those who have exposed themselves to infection. The policy of disinfecting centres bristled with difficulties, and the Society he represented was addressing itself to the efficacy of immediate self-disinfection, and recommended that the Ministry of Health should take steps to educate the public in the whole hygiene of this important subject, and to direct wisely and scientifically the knowledge which had been coming out since the war.

### THE HIDDEN HAND IN PATHOLOGY.

Sir James Crichton Browne emphasised the immense economic loss to the nation caused by venereal disease, which he described as the "hidden hand in pathology," and said it was daily being discovered that diseases which had hitherto been ascribed to other causes had syphilis at their root.

Dr. Addison, replying to the deputation, said there was no difference between the Society and the Ministry in their desire to do everything possible to combat, or prevent, venereal disease. It was suggested by the deputation that the Ministry should issue certain instructions to the local authorities and the public. They were dealing with one of the most difficult of social problems, and it would be necessary to have an overwhelming case to justify such an action, in connection with which they would have to contend with a great wave of public feeling, which would suggest that the Government was really encouraging vice. They had to have a very strong case that would meet the intense and vehement opposition that such a proposal would arouse. To adopt such a proposal towards the population as a whole would be held, and he thought with material ground, as doing something which would tend to encourage people to run risks. Personally, his mind was directed to one issue, and as far as he was concerned, whether it meant unpopularity or contempt—he did not care a bit—he had only one desire, and that was to see whether there was a sufficient basis of ascertained fact to justify him in proceeding on the lines suggested.

The intense and vehement opposition to which Dr. Addison alluded is, we realise, likely to proceed from the salt of the earth, from good women who have never come into contact with the results of venereal disease, and

of whose ignorance from the physiological standpoint there is no doubt. We sympathise with their demand for a high moral standpoint, and of course—with the means of self-disinfection to hand—this high moral standpoint should always be persistently inculcated.

The vehement opposition should be met by an explanation of the reason for the course adopted. The opposition to what was known as the "State Regulation of Vice" was opposition to one sex being humiliated and penalised for the self-indulgence and protection of the other. That policy failed as it deserved to fail.

The present proposition is that those—whether men or women—who expose themselves to infection shall, in the interests of the community, have the means to disinfect themselves at the earliest possible moment. That policy should commend itself to sensible people.

To come down to bed-rock. One human being is not permitted to poison another without paying the penalty of the law, for either manslaughter or murder. And when a man or woman deliberately or ignorantly poisons another with the virus of venereal disease, causing untold suffering and perhaps death, the law should take the matter in hand.

The only remedy for this crime—for crime it is—is that the Government should bring in a Bill making the communication of venereal disease by one human being to another, a criminal offence. In our opinion, the sooner this is done the better.

## OUR PRIZE COMPETITION.

WHAT ARE THE CAUSES OF SWELLING OF THE LEGS (1) DURING PREGNANCY, (2) AFTER LABOUR? HOW WOULD YOU DEAL WITH SUCH CASES?

We have pleasure in awarding the prize this week to Miss Reda M. Wilson, Queen Mary's Maternity Home, Cedar Lawn, Hampstead.

### PRIZE PAPER.

1. One of the questions always asked by a midwife at an ante-natal examination is directed to finding out whether the patient has noticed any swelling of her legs or feet—if so the cause must be carefully investigated.

a. If the patient reports that her legs are swollen at night, but that the swelling has disappeared after the night's rest, then this swelling is purely mechanical, and results from the pressure on the veins from the enlargement of the uterus. This will naturally be more marked in cases of hydramnios, or twins, or where the pregnancy is complicated by pelvic tumours. There will be no accompanying swelling in other parts of the body and apart from the discom-

fort caused to the patient, there is no need for worry. The patient should be advised not to stand about more than is necessary, and, if possible, to rest once a day with her feet raised.

b. *Kidney disease* may prove to be the origin of the swelling, when the urine, on being tested, will be found to contain some albumen. The patient will then be carefully examined for swelling in other parts of the body, particularly of the hands and face. If there is found to be puffiness of the face and hands, severe frontal headache and gastric disturbances, the "pre-eclamptic state" may be feared, and medical advice should be sought immediately in time for the patient to be treated before the convulsions appear.

Should the swelling of the lower extremities result solely from the albuminuria, the patient should be put to bed, kept on milk diet till the urine has cleared, kept as warm as possible, and the pores of the skin kept open.

c. *Heart disease* might be the cause of the swelling of the legs, and if there is nothing else in the patient's condition to account for it, and the swelling does not disappear after the night's rest, then medical advice should be sought.

2. After labour, swelling of the legs is one of the symptoms of "phlegmasia alba dolens," commonly called "white leg," so rarely seen now-a-days, and the more common complication of the puerperium femoral thrombosis. In both cases the swelling, which is accompanied by fever, pain and tenderness of the leg, occurs during the second week of the puerperium.

In cases of "white leg," when the swelling first commences it pits on pressure with the finger, but later on the swelling becomes too hard. This combined lymphatic and venous obstruction is, however, scarcely ever met with.

*Femoral thrombosis*, or clotting in the femoral vein generally follows some septic trouble, or severe ante or post partum bleeding. The swelling commonly begins in the parts farthest from the trunk, and the side of the foot or leg lying on the bed will show it first. The midwife will advise that a doctor be sent for, and until he arrives she will keep the patient in bed with the affected limb at rest on a pillow.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss R. Thompson, Miss M. James, Miss J. Taylor, Miss T. Robinson.

### QUESTION FOR NEXT WEEK.

What do you understand by anti-typhoid inoculation? What is its value? Mention the principal abdominal complications of enteric fever, and state how they should be treated.

## THE NECESSITY OF HOSPITAL TRAINING FOR MENTAL NURSES.\*

BY SIR ROBERT ARMSTRONG JONES, C.B.E., M.D.,  
F.R.C.P. formerly Medical Superintendent  
L.C.C. Asylum, Claybury, and Lt.-Col.  
R.A.M.C.

(Concluded from page 3.)

As was to be expected in this critical war, nervous and mental breakdown were inseparable illnesses from an active and strenuous life under conditions of stress and fatigue, associated as these conditions were with great and unaccustomed hardships, with compulsory and continuous exposure for long periods to sights and sounds of a horrifying nature, often with insufficient sleep, irregularity of meals and constant liability to cold and damp and wet, so that shortly after the commencement of hostilities cases of mental and nervous breakdown began to occur, and some reached this country as early as September, 1914. Insanity henceforth became a question of the utmost public importance, and special accommodation became necessary, much feeling was kindled as to its treatment and many questions were asked in Parliament about its relief, care and cure among our soldiers. The purely nervous cases were sent into the 4th London Territorial Hospital, or into the Red Cross Hospital at Maghull (formerly built for an asylum) and to the Springfield War Hospital—an annexe of the Middlesex County Asylum at Wandsworth, whilst the mental cases were received into the Napsbury War Hospital (formerly the new Middlesex Asylum), but none of the mental cases was certified; they were detained under Army orders. As is well known, these special institutions were soon extended in numbers in this country (as well as in Scotland and Ireland), until 19 asylums and annexes thereto in England and Wales had been vacated of their ordinary population, and with the help of the Board of Control (Lunacy) 30,000 beds were eventually placed in England and Wales at the disposal of the military authorities for the care and treatment of the soldier who was sick either in mind or body. At the same time, a general movement of the working classes towards securing better recognition of their work, more remuneration for their services, and shorter hours of labour have begun to be made, and since the war all these have been considerably changed for the staff in asylums. The authorities responsible for the management and direction of the public mental hospitals throughout the country realised that the comfort, welfare, and health of the patients depended upon a well-qualified and contented staff, and the conditions of life and the services of the staff were greatly improved. The recognition of their claims has been further publicly extended by giving mental nurses an acknowledged place in Council under the Nurses' Registration Act. Also, the staff of all the public mental hospitals is now being specially trained in mental nursing,

but there is still room for more full instruction in regard to sick and to bedside nursing. The fact that good nursing when applied early will often help to cut short an acute attack of mental breakdown, and the further fact that among the general population there are since the war many experienced and well-qualified sick nurses, should help to secure attention to the subject, and help also to direct attention to the great value of hospital-trained nurses in our mental hospitals. It is recognised that freedom from bed-sores in the case of long illnesses in our large mental hospitals is one indication of good nursing, and I am proud to state that at the Claybury Asylum there was not a single bed-sore during a period of five years, although one death occurred on the average on each of the working days of the week; and this reflects a great credit on the nursing skill of the staff. The number of recoveries may also be taken as an indication of good nursing, and the fact that many "service patients" who have been wounded in the service of their country are now patients in our asylums and requiring massage and electrical treatment calls loudly for the help of hospital training for mental nurses. As a further example of the need for an extension of hospital training in our asylums may be mentioned the fact that many women are admitted in a state of pregnancy, and many within a few days of their confinements; all this shows the necessity for a specially trained nursing staff. Outside the asylum in private nursing there is a great preference expressed for the mental nurse who has received hospital training, and it is this fact of training that helps to encourage a feeling of confidence on the part of the public in the administration of our large mental hospitals and in the special care and treatment of the insane who are received into our asylums.

Insanity is an illness of so disabling a character and so cruel in its results to the individual and to his dependents, its effects upon the home are so far-reaching and the reflections that are cast upon his family are so deep and permanent, that it is incumbent upon the State not only to hasten its cure, but to lessen its incidence. It cuts the sufferer off from all his domestic ties, it deprives him of his financial, civil and social rights, it disfranchises him and cuts him off from all his former privileges, and removes from him all the advantages of a free man, for his liberty of action has gone. When insanity occurs in a family it creates a terror and a consternation which is almost worse than actual death. In such a predicament a fully-trained mental nurse with a complete knowledge of sick nursing—one who has a combined knowledge of hospital and asylum work, is a "godsend," but she is a rare combination of endowments. She is an inestimable help to the sufferer, because she is able to hasten his convalescence, and she has a most beneficial influence upon his friends, because of her skill, as also upon those with whom she works, because she has secured their confidence. The application of trained sick nursing acquired in the hospital is

\* Read at Nursing Conference, R.H. Hall.

the best "first aid" treatment in all cases of nervous and mental breakdown, and they can be secured by "reciprocity"—i.e., by the recognition of asylum work by the hospitals, as is now done by asylum authorities of the time spent in the general hospital. A well-trained mental nurse with a full knowledge of sick nursing has been taught to be observant and practical; she is accustomed to note from her training in the hospital the signs of injury and disease and their relief; and from her training in the asylum she has learnt to impart sympathy, to encourage confidence, to allay suspicion and to relieve mental unrest. Like the quality of mercy, she is twice blessed, the mind and the body both respond to her aid and tact. She realises that the efforts of a good nurse are to assist Nature in her own work of healing. She helps the body to regain its normal functions, and by suggestion, persuasion and her own personal example she helps the mind to its permanent restoration. In the possession of skill born of experience in the hospital and the asylum she is qualified for the highest place which any institution can offer. We desire to see our asylums not only custodial establishments for mental disorders, but also curative hospitals in the best sense; we want them to be schools of re-education for our patients by means of which life may be rendered more useful because health has been rendered more perfect, and the essence of this process is "reciprocity."

### NURSING ECHOES.

Miss Margaret Huxley, so long a leader of nursing organisation in Ireland, has been elected Vice-Chairman of the General Nursing Council for Ireland. We congratulate the Council on its selection. Miss Huxley was trained at St. Bartholomew's Hospital in the eighties, but has for upwards of thirty years devoted herself to the uplifting of nurses in Ireland, as a member of the Irish Nurses' Association and the Irish Matrons' Association.

The Irish and Scottish Councils have drafted their Rules for the conduct of business and the registration of existing nurses—but await consultation with the English Council before putting them into force. We fear, owing to the holiday season, some weeks may elapse before registration is in force. Once more let us advise that certificates of birth and marriage be in readiness—also the small guinea fee put aside to cover the cost of registration, to be sent in with the official Form of Application.

The Metropolitan Asylums Board, at a recent meeting adopted a report on the subject of the remuneration of the nursing staff (other than in Mental Hospitals). The Board

recommend that the salaries of the nursing staff be increased by a sum approximately equal to 30 per cent. of the permanent salary of each grade, war bonus remaining unchanged; and that the working week for the nursing staff be in future 50 hours, with four weeks annual leave.

As the Matrons and Assistant Matrons are not affected by the 50 or 48 hours week or payment for overtime—they are considered worse off than their juniors—it is therefore recommended that the annual leave of Matrons shall be six weeks, and that of Assistant Matrons five weeks. The cost of the above proposals is estimated at £47,000 per annum.

A formal debate took place at a recent meeting of the Camberwell Board of Guardians on a recommendation from the Infirmary Committee "that permission should be given to the Nurses to play tennis in the Infirmary grounds on Sundays between one and six o'clock in the afternoon." Several of the Guardians opposed this sensible suggestion by speech without consulting the nurses themselves, and fifteen voted against it, to thirteen for. We agree with the *Poor Law Officers' Journal* that if the Guardians desire to administer rightly in this matter they will leave the question to play or not to play with the nurses, who, having reached years of discretion, are fully able to decide what is right for themselves. The Medical Officers enjoy this harmless form of recreation on Sundays, why not the nurses? Poor Law Guardians in the guise of Mrs. Grundy leave us cold.

A deputation from the Workhouse Nursing Association which waited on Dr. Addison last week explained the details of a scheme for the relief in sickness and old age of a large number of the semi-professional and educated classes whom circumstances arising out of the war had reduced to poverty. It was suggested that the provision made in Poor Law infirmaries for chronic and incurable disease might be so extended and modified as to include, and be acceptable to, the new class of poor. Dr. Addison expressed sympathy with the proposal.

We wonder if the "new poor" have been consulted! The stigma of pauperism must be removed from these institutions before they can be made acceptable to any class of poor, old or new, and this should be done without delay.

The late Mr. Henry Lyne, of Park Crescent, W., bequeathed £500 to his nurse, Miss Elizabeth Gordon.

National Health Insurance has been very aggravating to probationers and trained nurses, as "7s. 6d. a week was not worth bothering about." The amended Act makes conditions a little better:—

Contributions and benefits have both been raised. The new weekly rates of contribution will be 10d. for men and 9d. for women, of which amounts the employer will contribute 5d.

New rates of illness benefit will be 15s. a week for men and 12s. a week for women. Disablement benefit in each case will be 7s. 6d. a week, and maternity benefit £2.

The estimated additional expenditure will be £30,000,000 a year.

From the published reports of its proceedings the Poor Law Workers' Trade Union appears to be making great strides. It has recently federated with the Asylums Workers' Union. Brotherhood through effective co-operation is the ostensible aim, and the social side as well as the economic is to be strongly developed in the future. Many Boards of Guardians are co-operating, and have met the Union in the best and kindest spirit, recognising that common justice must be done to secure a contented service. Given model authorities, a model service will be secured.

The Poor Law Workers' Trade Union has urged nurses to join it, without much success, but now that Trained Nurses have their own Trade Union, both societies can help one another in times of stress.

A very interesting dispute is in progress between the Guardians of Blackburn Union and their nursing staff on the question (dating back to April, 1919) of payment for overtime, owing to shortage of nurses. The Guardians admit the principle, but offered nurses only 3½d. an hour. Now the Poor Law Workers' Trade Union of England and Wales have taken up the cause of the nurses, and demand the usual trade union time-and-a-half rate—1s. 3½d. for nurses, and 1s. 9d. for Sisters. Additional feeling has been lent to the matter by the fact that those nurses, receiving all told from £2 os. 10d. per week to £2 5s. 3d. per week, have as their colleagues and helpers, male nurses at £3 12s. 9d. At Blackburn thousands of girls in industrial work, with a guaranteed week of 48 hours, earn anything from £3 to £5 per week, with every evening and every week end then at their own disposal.

It may be argued that an entirely different class and type of girl is required for nursing—from that suited to industry. True, but conditions are turning a somersault, and the fact remains that the old altruistic spirit which animated nursing recruits in the past becomes rarer every day, and the Victorian love of gentility is passing away. Well-educated girls worked in factories very skilfully during the war, and we know of more than one professional man's daughters who have good billets in factories, and find the life full of interest and the pay very acceptable.

The lesson has got to be learned that unless the nursing profession is organised on modern lines to meet the restricted altruism of modern women, and they are treated like average human beings and not like martyrs and saints, the shortage of nurses will continue. You can't pour out of a pitcher what isn't in it!

Modernise the system. Let the brain enjoy its functions as well as the hand, and the nursing world will cheer up all round. Overtime, which leads to pottering and avarice, should be discouraged in an efficient scheme of training and hospital work.

The Toledo District Nurse Association which has been doing excellent constructive health work among the poor and uneducated of the city, has introduced a new educational feature of inestimable value, says the *Modern Hospital*. To the duties of Household Educator has been added that of teaching classes of children, ranging in age from seven to fourteen the principles of right eating. At these nutrition classes which meet once a week at the dispensary, charts are used showing by the picture method what should and should not be eaten. Talks and stories on health subjects are part of the programme, and the children are given weekly charts to be filled out at home giving information as to what they have eaten each day, how much water they have drunk, how much play time they have had, how much sleep, and how many hours they have spent in school. Each child is given a thorough examination by a physician, is weighed once a week, and is measured for height every three months.

The Household Educator's general line of duties is to instruct mothers of families concerning the proper choice, purchasing, and cooking of food, to aid them, when necessary, by supplying either funds, or the essential food, to obtain a well-balanced ration, and to instruct them in all phases of practical household economics.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION

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## HOLIDAYS.

In connection with meetings which have taken place recently we have received many letters of apology for non-attendance which have served to remind us that the holiday season has now arrived and we take this opportunity to wish all our members a very happy holiday and hope that all may return with fresh strength for the work of another year. The months which have passed since the last summer holidays have been strenuous ones for the nurses' organisations, but we look back with a great degree of satisfaction on what has been accomplished. We trust to our members, in the time that is coming, to do what lies in their power to strengthen the Association by making its aims and purposes as widely known as possible among their fellow workers and thereby increasing its membership. As the last of our meetings for the summer will shortly be over, nurses who wish to join the Association should forward their applications to the Secretary at once. Only those nurses who possess a certificate of three years' General Training are eligible for membership and the application must be made on a prescribed form which can be obtained from the Secretary, 10, Orchard Street, Portman Square, W. We remind all members who have books from the Library that those should be returned before August 1st.

## THE PRINCE OF WALES HOSPITAL EN FÊTE.

At the Prince of Wales's General Hospital, Tottenham, despite dull weather, the Fête on July 1st organised by the Ladies' Association for the Samaritan Fund and Convalescent Home, was well attended and a great success.

The Hon. Lady Murray opened the fête, afterwards making many purchases at the stalls and going round the wards.

The Duchess of Wellington also spent a considerable time chatting with patients in the various wards and making a tour of the grounds, where there were various amusements—a Badminton tournament, coconut shies, donkey rides and refreshment tents fitted with electric urns supplying the unusual luxury of really hot tea out of doors.

The Bazaar was in Morley Ward (just vacated by its patients for the annual cleaning). The stalls were decorated in black and white, Corinthian columns on either side supporting a frieze of stencilled farm favourites, such as ducks, pigs, cats and rabbits, coloured gas balloons floated up from the stalls, and a large flower stall at the end of the ward, together with the innumerable pretty articles for sale, made a charming picture.

The balcony was decorated with foxgloves and fern leaves, the lawns and trees beyond being at their greenest, contributed to the general feeling of enjoyment. In the evening the threatening clouds burst, so that the extensive electric lighting of the gardens, which had been prepared was not even switched on for a moment. Instead of dancing on the Directors' Lawn, several stalls were quickly cleared away, and the dancers appeared quite happy in the ward.

Refreshments were transferred from the tents to the Lecture Hall.

Among the prizes for Badminton were a salmon and a tongue, both of which were presented by their winners (who had previously shown their sporting worth by finishing the tournament in the rain) to the Matron for the nursing staff.

Other prizes were a wedding cake, suit-case, tea service, tobacco pouch, linen handkerchiefs, chocolates.

One of the Sisters was awarded a box of handkerchiefs for having been the first to dispose of and send in a book of Limericks. The prize-winner for the Limerick will be declared on 9th inst.; the prize is a young live pig.

## GUILD OF HEALTH.

"ALL NURSES ARE CORDIALLY INVITED TO A SPECIAL MEETING."

To which cordial invitation I gladly responded, for I had long wished to know more about, and identify myself with, this great spiritual cause. One of the smaller rooms of the Caxton Hall was well filled on Thursday, June 24th, at 8 p.m. Dr. Jane Walker presided.

The supremacy of the spiritual life in man is what the Guild of Health stands for, and its main objects are fourfold, namely, (1) The study of the influence of spiritual upon physical well-being;



(2) the exercise of healing by spiritual means, in complete loyalty to scientific principles and methods; (3) united prayer for the inspiration of the Holy Spirit in all efforts to heal the sick; (4) the cultivation through spiritual means of both individual and corporate health.

This was the burden of the song of the Rev. Harold Anson, chairman of the Guild; his speech was deeply interesting and uplifting. The body needs spiritual and mental healing, he said, as well as physical, to complete a cure. One of the faults of healing is that it is so very materialistic, the world is crying out for someone who understands the spirit. Probably everyone knows—either consciously or subconsciously—that *fear* is a hindering factor in disease, but the speaker laid great stress upon the fact, that it is at once a *dangerous* factor, and a *great cause* of disease; anything that nurses can do to get rid of fear will enormously help in nursing the sick. Continuing, the speaker earnestly impressed upon his hearers the necessity for all who attend the sick to empty their own minds of all negative thoughts. The mind must be attuned to the conditions necessary for healing, namely, good thoughts. From the physiological standpoint, the speech of Dr. A. L. Ash, M.B., B.S., M.R.C.S., was not less interesting; he enumerated the physical effects produced by fear, hatred, malice, jealousy, &c. These bad feelings upset the body, give indigestion, depression, and low blood pressure. Optimism gives the opposite effects. "If," said the doctor, "you also study the subject from the psychological basis, you will end in being idealists." The Chairman and both speakers made a special point of the importance of abandoning *fear*. A discussion was afterwards invited, and very readily responded to. Undoubtedly the subject greatly attracted the audience. There surely could be no doubt whatever in the minds of anyone that it is one of supreme importance.

B. K.

## NURSING IN THE HOUSE OF COMMONS.

In the House of Commons on Wednesday, June 30th, three questions were concerned with Nurses and nursing.

### ARMY AND MARINE PENSIONS.

Mr. Campbell asked the Secretary of State for India when the revised scale of pensions for officers of the Indian Army Departments, lady nurses of Queen Alexandra's Military Nursing Service for India, and for officers of the Royal Indian Marine will be issued?

Mr. Montagu replied that the revision of the pensions of the classes referred to is still under consideration, and it is hoped that a decision will be come to shortly.

### NURSES (KANTARA, EGYPT).

Major Birchall asked the Secretary of State for War whether there are a number of nurses,

stationed at the 24th Stationary Hospital, Kantara, Egypt, who have been in Egypt for more than three years without leave, and whose contracts have expired; and whether arrangements can be made to bring them home?

Mr. Churchill replied: "I have called for a report, and will write to the hon. Member as soon as it is received."

### ST. BRIDGET'S HOME (WEXFORD).

Colonel Ashley asked the Chief Secretary for Ireland whether he is aware that the Wexford County Council have objected to the use of St. Bridget's Home, Wexford, as a nursing home for wounded soldiers; and what steps the Government propose to take to look after the injured Service and ex-Service men in that district?

Sir A. Williamson replied: "I have been asked to reply. My attention has not previously been drawn to this matter, but I have now called for a report."

## NURSES AND CHARITY.

The following Resolution was passed unanimously at the Annual Delegates' Conference of the London Constitutional Labour Party:—

"That this Conference protests against the application of Charity to Nurses in Public and State Services, especially to those who have become disabled through the war, and calls upon the State to meet its obligations in this respect and not to place them necessarily in the position of being recipients of Public Charity."

## THE SUMMER SALES.

Messrs. G. Cozens & Co., Ltd., Edgware Road, W., took time by the forelock in beginning their Summer Sale on Monday, June 21st. There are bargains to be had in every department—so substantial, indeed, that they are likely to be picked up quickly. Therefore, though the Sale will last until July 19th, we advise our readers to be on the alert, and pay a speedy visit to Messrs. Cozens' establishment if they wish to secure some of the many bargains in costumes, sports coats, millinery, and other departments.

## DONATIONS:—GENERAL FUND.

The Hon. Treasurer acknowledges with thanks the following donations:—

Mrs. Campbell Thomson, £2 2s.; Mr. Haslam, £1 1s.; Miss M. Woodward, £1; Miss A. Dorrell, 11s. 4d.; Miss I. Bedwell, 10s. 6d.; Misses E. Freer and M. Tait, 10s.; Misses Conroy Moore, Thorley and Watts, 5s.; Miss E. Duncan, 4s. 6d.; Miss E. M. Swainson, 3s.; Miss M. Coates, 2s. 6d.; Miss M. E. Sinclair, 2s.; Misses Burr and MacVicker, 1s.

ISABEL MACDONALD,

Secretary to the Corporation.

10, Orchard Street, W.

## LEAGUE OF ST. BARTHOLOMEW'S HOSPITAL NURSES.

The Summer General Meeting of the League of St. Bartholomew's Hospital Nurses was held in the Clinical Theatre of the Hospital, on Saturday, July 3rd. Miss Helen Todd, who presided, was re-elected for another term of office as President. Mrs. Lancelot Andrews was appointed a Vice-President, and Miss Mabel Sleight, Treasurer, in succession to Mrs. Turnbull, who, to the regret of the members asked to be relieved of the work.

Mrs. Turnbull presented a financial report showing a balance in hand of 77 15s. 4d., but said that this had been possible because only one number of *League News* had been issued. It was proposed to take a postal ballot of the members, as to whether the subscription should be increased to 5s., and two numbers of the *League News* be issued annually, or whether it should remain at 3s. 6d. with one annual issue of *League News*.

The General Secretary, Miss H. T. Baines, presented an encouraging report showing that 47 new members had been elected, and that the members now numbered 1,055.

Mrs. Matthews presented the report of the Benevolent Fund showing a balance in hand of £32 14s. 1d., and in War-saving bonds of £100, and Miss Ethelle Campbell discussed the question of putting the Fund on a more solid foundation. There had not, so far, she said, been many calls upon it—ten in nineteen years—and no applicant had ever been refused assistance. The question was referred to the Executive to present a detailed scheme at the next meeting.

Lady Baddeley, Miss Kennedy (Sister Mary), Miss Maw, and Miss M. Riddell, R.R.C., were elected members of the Executive Committee, in place of the retiring members.

The President then presented to Miss Beatrice Cutler, who for six years acted as General Secretary of the League, a beautiful little ornament of opals and tourmalines mounted in gold, and a cheque for £35, and Miss Cutler, in warmly acknowledging the gifts, said that her interest in the League would always be deep and unabated.

Miss Cutler then gave a very interesting account of a recent visit to Belgium, showing how splendidly the Belgian people were working in the restoration of their country. The members then adjourned to the Great Hall for tea, where they had the pleasure of meeting some of the members of the General Nursing Council for England and Wales, and Miss Huxley of the Irish Nursing Council. The tables were beautifully decorated with flowers, given by Miss Hurlston and her friends, and brought by her from the country; and the music arranged by Sister Hope (Miss Maymam) and provided by members of the nursing staff, was greatly appreciated. Miss Firth presided at the piano, and Miss Holme delighted everyone with her lovely voice.

Everyone was very pleased to see the President greatly improved in health, and to welcome her back to her official duties.

## THE NURSES' MISSIONARY LEAGUE. "OUR CAMP."

Sandsend, on the Yorkshire coast, a little place north of Whitby—just a name on the map to most nurses, but to all who were lucky enough to spend a fortnight there in June in the Nurses' Missionary League "Camp," it just stands for the most glorious holiday.

Our tent (not of canvas, but stone) was pitched three minutes from the sea, just beside the woods, with the cliffs on either side. With our own tent on the shore for use when bathing, and with perfect weather, one can imagine the result.

We did sleep indoors, and had some of our meals there, and it was home, and we were a jolly family together; but the woods, the cliffs and the shore were the places that saw us most. Sometimes going further afield, we think of the day at Whitby, Kettleness and Runswick Bay, and for some time row back in the evening. What walks! What freedom to do just as one liked! What renewed friendships from our training school days, and new ones formed.

What a meeting-place it was—Matron, Sister and Pro., private and district nurses, health visitors and those returned from the mission fields of Jerusalem, Africa, India and China. What talks we had of the nursing out-look all over the world! The problems at home and the nursing associations of India and China!

One realised what a unit of a tremendous whole one is, and rejoiced that our nursing ideals are being carried so far, when we heard of the coloured nurses, male and female, who are taking their public nursing examination after a three years' training, and the midwifery examination for girls and the positions of responsibility they have been able to take up after this. We heard the other side—of the hospitals that had to be closed for lack of nurses, the doctors who had to do their work unaided by any British nurses, and the cases who could get no other nursing than that of their own relatives.

As we heard of the world's need, both at home and abroad, our longing was that we might be sent "not where we were needed, but where we were needed most."

The time seemed all too short; days seemed to fly, as they always do when one is enjoying life to the full, and one wished that every nurse might enjoy this glorious holiday with us.

Yes, we were a jolly family together, and were able to realise the bond of union of our profession better without the restraints of hospital etiquette, and before we parted realised the meaning of our family connection in a more real way. Heaven seemed very near as we saw it reflected in the beauties all around, and there were those talks on higher things, Prayer, Discipleship, Vocation, which made us realise more of our responsibility to God and to our fellow-man, and we gave Him thanks for leading us into a closer communion with Him and with one another in that never-to-be-forgotten holiday.

## APPOINTMENTS.

### MATRON.

**Wellhouse Hospital, Barnet.**—Miss Winifred A. Todd has been appointed Matron. She was trained and certificated at Guy's Hospital, London; after which she was Sister at the Rotunda Hospital, Dublin; and has recently been Matron of that important school of maternity nursing and midwifery. Miss Todd holds the certificates for massage of the I.S.T.M. (now the Chartered Society of Massage and Medical Gymnastics), and of the Central Midwives' Board.

Miss Jenkins was at the same time appointed Assistant Matron.

**Tuberculosis Sanatorium, Huntingdon.**—Miss M. Ethel Briggs, A.R.R.C., has been appointed Matron. She was trained at the Royal Infirmary, Derby, and worked in France for five years during the war. She has also done duty as Matron at the Cottage Hospital, Felixstowe, as Housekeeper at the Royal Infirmary, Hull, and has had experience in private nursing at home and abroad. She has also been mentioned in dispatches.

**King George V. Hospital, Rotorua, New Zealand.**—Miss Thurston, late Matron-in-Chief New Zealand Expeditionary Force, C.B.E., R.R.C., has been appointed Matron of King George V. Hospital, Rotorua. As this hospital is to be both civil and military, and to be a great orthopaedic centre for the North Island, it is probable a much larger staff than the 25 Sisters now employed, will be needed in the near future.

**Whitianga Hospital, Mercury Bay, N.Z.**—Miss E. Polden, trained at St. Bartholomew's Hospital, London, and formerly Matron of the Royal United Hospital, Bath, has been appointed Matron.

### SCHOOL NURSE AND HEALTH VISITOR.

**County of Clackmannan.**—Miss Jessie MacRitchie has been appointed school nurse and health visitor. She was trained at the Eastern Hospital, Dundee, and has held the position of Health Visitor at Littleborough and of district nurse at Halifax, Gargrave, and Clayton.

### SISTER.

**Dispensary for Women and Children, 15, Portland St., Glasgow.**—Miss Laura Frisby has been appointed Sister. She was trained at the Royal Infirmary, Glasgow, and has been on the Staff of Queen Charlotte's Hospital, and is a certified midwife.

**Springfield Maternity and Children's Hospital, Rochdale.**—Miss A. Wild has been appointed Sister. She was trained at the Royal Infirmary, Oldham, and is a certified midwife.

## QUEEN VICTORIA'S JUBILEE INSTITUTE.

### TRANSFERS AND APPOINTMENTS.

Miss Bessie M. Taylor is appointed to West Riding N.A., as County Superintendent; Miss Emily M. Browning to Somerset as Junior Assistant Superintendent; Miss Nancy B. Lowe to Birmingham (S.H.R.) as Second Assistant Superintendent; Miss Caroline R. Sowden to Birmingham (S.H.R.) East Home as Senior Nurse; Miss Carrie Brazell to Hammersmith; Miss Florence Carey to Spalding; Miss Cithie Carrick to Huddersfield; Miss Sarah M. Haswell to Olton; Miss Margaret M. Heritage to Shoreditch; Miss Gladys M. Roberts to Worcester as General Training Sister; Miss Louisa Tomlinson to Street.

## A PREMATURE ANNOUNCEMENT.

We note that the appointment of the Registrar to the General Nursing Council of England and Wales was announced by a non-professional journal for nurses last week. As the Minister of Health has not yet sanctioned this appointment the announcement was premature, and we wonder who gave this item of information to the journal in question.

## PRESENTATION.

On retiring from the position of Matron of the Batley and District Hospital, after twenty-five years of devoted service, Miss Emma Cann has been the recipient of many gifts, including an illuminated address and a cheque for £500 presented to her on behalf of the inhabitants of the town and district by the Mayor, Alderman H. North, J.P.; while the ex-patients' committee presented her with a handsome travelling bag. The Committee has settled on Miss Cann a pension of £1 per week. Miss Cann has two sisters in the nursing profession, one being Matron of the Norfolk and Norwich Hospital.

## HONOURS FOR NURSES.

The King held an Investiture in the Forecourt of Holyrood Palace, on July 5th, when the following nurses were decorated by His Majesty:—

### BAR TO THE ROYAL RED CROSS.

Miss Janet Melrose, Territorial Force Nursing Service.

### THE ROYAL RED CROSS (FIRST CLASS).

Miss Catherine Roy, Queen Alexandra's Imperial Military Nursing Service (also received the Military Medal); Miss Elizabeth Cumming, Army Nursing Service Reserve; and Miss Helen Fraser, Civil Nursing Service.

### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Dorothy Scott-Erskine.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Annie Nicoll, Miss Jean Roy, and Mrs. Christabel Thomson.

*Territorial Force Nursing Service.*—Miss Alexina Cameron, Miss Catherine Matheson, and Miss Margaret Walker.

*British Red Cross Society.*—Miss Isabella Dodds, Miss Mary Duncan, Mrs. Elliot, Miss Mary Grassick, Miss Hannah Glendinning, Miss Jane Gregorson, Miss Alice Macdonald, Miss Johan McKinnon, Miss Jessie McLean, and Miss Annie Paterson.

*Voluntary Aid Detachment.*—Miss Margaret Montgomery and Miss Jean Wilson.

## PROFESSIONAL RECOGNITION FOR SIR JENNER VERRALL.

At the recent meeting of the British Medical Association at Cambridge, Sir T. Jenner Verrall, LL.D., was elected a Vice-President "for the long-continued and eminent services he had rendered." The President said no words could express the thanks which the Association owed Sir Jenner Verrall for the work he had done during so many years. Sir Jenner Verrall is a member both of the General Medical Council and of the General Nursing Council.

## INTERNATIONAL NEWS.

## REGISTRATION IN SOUTH AFRICA.

The *South African Nursing Record* reports in full the Annual Meeting of the South African Trained Nurses' Association, held at Cape Town, in May. It was a wonderfully illuminating meeting, occupying five days, and covered nearly all the questions of burning interest to nurses.

It is high time legislators in South Africa realised that Nursing, though ancillary to medicine, is a definite department of health science, and that trained nurses have a right to a definite status and a Governing Body of their own, apart from medical control.

Nearly thirty years ago the Medical Council of the Cape of Good Hope incorporated provision for a nurses' register in the Medical and Pharmacy Register, and they are clinging to this power, although nursing has made such enormous strides since 1891.

Amongst the interesting items brought up at the Conference, Dr. Tremble announced the result of their deputation to the Minister of the Interior (Sir Thomas Watt), as follows:—"No prospect of a Medical Bill during this Session, but a promise of its introduction next Session if the Minister were still in office. Refusal to introduce a Nurses' Registration Bill on ground that he wished one Bill to cover medical and all allied professions. Refusal to introduce a Midwives' Registration Bill on the same grounds. Promise to insert a clause in the Medical Bill providing for the representation of the Nursing Profession on the Medical Council."

All this is very out of date, and we hope our South African colleagues will study the Nurses Registration Act, England and Wales, draft one on its model, and bombard their legislators with up-to-date information. "Pep" is evidently what these gentlemen need:—to judge from the expression of nursing opinion at Cape Town. South African nurses appear to be well supplied with it.

## AFTER REGISTRATION, V.A.D.'s.

The V.A.D. question cropped up, of course.

Miss Shepley pointed out that though V.A.D.'s were afforded special opportunities of completing their training in general hospitals, a great many of them who had not done so, were in private practice throughout the country, where they were taking full fees. These practising V.A.D.'s were not among the best, most of whom had embraced the opportunity of complete training, but generally were the less satisfactory ones. They were injuring the reputation of the profession.

Mrs. Knight said the doctors were responsible for this state of things, since V.A.D.'s were, of course, working under them.

Dr. Tremble proposed that the General Secretary should write to the British Medical Association, asking them individually and collectively to discourage the employment of any but qualified nurses. This was unanimously agreed to.

## A NOTABLE LIBEL ACTION.

The notable libel action which is arousing so much interest in the nursing world, brought by Miss E. Maude MacCallum, against the late Editor and the proprietors and publishers of the *Hospital* and the *Nursing Mirror*, is expected to come on for hearing in the High Courts of Justice, on Monday, July 12th, or Tuesday, July 13th.

## NURSES HELP DOCTORS.

The concert at the Wigmore Hall on July 2nd, under the patronage of H.R.H. Princess Arthur of Connaught, organised by Miss M. Ellis Rowell in aid of the Royal Medical Benevolent Fund, not only added £150 to the coffers of this Fund, but was a most enjoyable occasion. Such well-known artistes as Miss Olive Sturgess, Miss Phillis Lett, and Mr. Lloyd Chandos delighted the audience with their singing, so that almost every song was encored. The pianoforte solos of Mr. Ernest Busby and the violin solos of Miss Elsa Stamford were both marvels of technique and musical skill, while Miss Gertrude Tomalin brought down the house with her monologues. We congratulate all concerned.

## "JOUJOU."

## THE PERFECT BRASSIER.

The importance of a Brassier (bust support) which permits of complete freedom of movement and yet gives support where necessary, will be readily appreciated. The "Joujou" Brassier, which is the product of years of study by a leading Paris fashion artist, and is patented in Great Britain, France, America and the Colonies, has lately appeared on the market, and has only to be seen for its merits to be realised. It is approved by members of the medical profession for its hygienic qualities and, as it can be worn with or without a corset, it is of special interest to the mothers of growing girls who desire to conserve their figures, without restriction. It is usually found to give quite sufficient support to those who are fond of sports, or for wear with a boudoir gown. If worn with a corset its patent attachments make it absolutely firm. Maternity nurses should specially note it as it is the only Brassier which does not interfere with infant feeding. The sole manufacturer is Wardalla, Ltd., 104, George Street, Portman Square, W.1., and the prices are from 15s. 9d. upwards.

The Brassier attracted much notice and praise at the recent Exhibition at the Royal Horticultural Hall.

## A WORD FOR THE WEEK.

"Wisdom is to the soul what health is to the body."—*Roche foucauld*.

"Character is stronger than intellect; a great soul will be strong to live as well as to think."—*Emerson*.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

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**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## BOOK OF THE WEEK.

## "YELLOWLEAF."\*

This remarkable and clever novel has in it every element that makes for success, and is guaranteed to hold the readers' close attention from start to finish.

The personalities of old Lady Mary Dampierre and her butler Bruno alone are sufficiently interesting to secure interest. The whole atmosphere is unusual and arresting.

Lady Mary, known to the family as "Grandmother" and to the servants as "the old lady," had been crippled in the early days of her married life by an accident.

Possessed of considerable wealth, her affliction was mitigated in every possible way by means of a succession of improved wheel chairs.

She sat in her irregularly-shaped drawing-room in St. John's Wood, in a spot protected by a screen, known as Grandmother's or the Old Lady's Corner. Asked to write down the phrase, eight out of ten members of the household would have given to the corner a capital C, for the corner had become during the years of Lady Mary's inability to move something between a household shrine and a market place. The other *dramatis personae* are Lily, the widowed daughter of Lady Mary's only son; her two children, Jim and Picotee; and Charles Thorn, the old lady's nephew, and Jim's tutor.

At the opening of the story the peace of this extremely happy and interesting circle of people is threatened by the expressed desire of the musician, Jacques Aghassy, to marry Lily Dampierre.

On this man is destined to hang the fate of nearly all the other persons mentioned.

In spite of imperious old Lady Mary's instinctive dislike of the man, and her usual dominating will, he attains his desire.

Referring to Lily's musical susceptibility, he reminds Lady Mary "The piano is my friend."

The old lady tells him bluntly, "If you wish to bully her you will find it easy to do so; but you will not find it easy to bully me, and until I die I shall stay with her."

And so Aghassy married gentle Lily Dampierre, and another member was added to the house in St. John's Wood.

On the morning of the wedding, faithful old Bruno went to church and confided in God and Our Lady his true feelings as to Aghassy.

He acknowledged that he had been a vile old man in hating the illustrious gentleman who was to-day to marry his illustrious lady, but he added "There is something, O dear God, and dearest and most understanding Our Lady, about the shape of his feet that I cannot stand."

From the time that Aghassy brought back his bride to Yellowleaf there was a note of discord

and discomfort in what had hitherto been a happy household.

The old Lady, Charles and Bruno viewed him with a sense of distrust, and on the part of the two latter actual dislike.

Aghassy wormed himself into the children's affection, and subtly alienated the boy Jim from Charles, to whom he had hitherto been devoted.

Old Lady Mary's letters to Charles, who then decided to travel, are very characteristic documents, and full of grim humour. She ends one letter with a pathetic touch, where she lives again her brilliant and fascinating youth.

"It's late at night, my dear, and the faithful and unpleasant Drake (her maid) believes me to be asleep. I am sitting up in bed writing, as no lady of seventy-eight ought to be writing, by the light of one candle, and the candle's behaving very badly. It seems to be spitting all down its own sides, and I must go to sleep."

"Some day, my dear Charles, I mean to write a book about dreams, the dreams of old people, for do you know, here I am, an old, old thing, and yet almost every night I am young again, and wandering about in beautiful parts of the earth that I knew when I was young; and the people who are with me are not old, but young and bold and bad, many of them, and dear and delightful, and, oh! my dear Charles, so many of them make love to me."

The strong affection existing between Lady Mary and her old servant Bruno, is touching and convincing.

He makes bold to tell his lady of his dislike and distrust of Aghassy. "Shall I tell your Excellency what I mean? Mr. Aghassy frightens the Signorina Lily; I believe she's sorry she married him. She sits and thinks and thinks of my Captain (her first husband). Ah! 'furbo, furbissimo, he is, Signor Aghassy!'"

"Furbo!" repeated Lady Mary under her breath. "Artful—sly."

Aghassy fully justified old Bruno's instinctive dislike of him, and the outcome of his extremely unpleasant character ends in tragedy—but we will not spoil a good story by revealing its plot.

Our readers must not omit to place this absorbing novel upon their holiday list.

H. H.

## COMING EVENTS.

July 14th.—Presentation of Prizes to the Probationers trained at St. Marylebone Infirmary, by the Mayor of St. Marylebone. Reception at the Infirmary, St. Charles Square, W. 3 p.m.

July 19th.—National Union of Trained Nurses. Lecture, "Unemployment Insurance," by Miss Florence, Secretary, Women Clerks and Secretaries' Friendly Society, 46, Marsham St., S.W. 7 p.m.

July 21st.—Concert at 10, Downing Street, by kind permission of Mrs. Lloyd George, in aid of St. Bartholomew's Hospital. Viscount Sandhurst will preside.

\* By Sacha Gregory. Heinemann, London.



## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## HAY FEVER.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—In reading the paper in the June 26th issue of the B.J.N. on hay fever I noticed that no mention is made of an almost certain preventative. Hay fever is rarely cured, though it is sometimes outgrown. It can, however, be prevented by use of a homœopathic preparation, "Tincture of Authoxanthum," a few drops put in the palm of the hand and inhaled up the nose. I have recommended this to many sufferers from hay fever and it has never failed. A friend of mine only last week told me that this was the first spring or early summer she had enjoyed for 21 years, and she was a real martyr to hay fever.

Yours obediently,

MARY DEMPSTER.

50, Thurloe Square, S.W. 7.

## KERNELS FROM CORRESPONDENCE.

## INDIVIDUAL ACTION BY MATERNITY NURSES.

*Maternity Nurse.*—"I have little patience with all this work shirking. Nursing the sick seems the last inclination of the modern nurse. All the same, I note the College of Nursing, Ltd. (its Council, I presume), wants a fifty-six hours' week instead of forty-eight hours for all nurses, excepting maternity nurses. As it does not admit maternity nurses to membership and has no maternity nurse on its Council, by what right does it meddle with our affairs and address the Ministry of Labour concerning them? As maternity nurses have no organisation, let us state our case individually to the Minister—whether we wish to be included in the Special Order or not. Wild horses will not drag me from my mothers and babies if it is not safe to leave them."

## TOP DOGS.

*Scottish Sister.*—"I have just written a strong letter to the *Glasgow Herald* on the salary of the Education Authority Nurses—£130 per annum! On the recent occasion of the Director of Education in Glasgow having his salary raised from £1,500 to £2,000, a member said 'he felt sure the rate-payers did not put them there to sweat their employees!' The British Medical Association has issued the usual notice, as the Assistant Medical Officer's salary is *below the minimum*. I suggested it was time the Nurses' Union got busy. I asked the Commission if they were only concerned with the salary of the top dogs!"

## HOW NOT TO DO IT.

*A Glasgow Sister.*—"I wonder if all the people who undertake to administer War Funds are possessed of unreason and lack of commonsense! A friend of mine who nursed in France 'for the duration,' was more than once mentioned in despatches, and was decorated, found, after taking up her previous work, that she would have to undergo a serious operation. The consequent drain on her finances was considerable, and having no pension to help her along, she applied to the Fund for the Disabled to see if it could do anything for her. They were sympathetic and sent her a form to fill up, one of the questions being something like—

"Are you in receipt of any other pension? and the answer, of course, was "None."

"The reply to this was that they were sorry, but *had she had a pension they could have helped her; as it was they could not*. Had she had one, of course, they would not have been troubled. But then, 'unto every one that hath shall be given,' and so the matter ended."

## THE WILL OF THE PEOPLE.

*A Sinn Fein Sister, Ireland.*—"Matters over here are very quaint. Troops and guns and bombs and tanks, and aeroplanes still pour in. The English Government fancy that by their help, and through their excesses, they are governing the country. The reverse is the case.

Our county and district Councils, with few exceptions, recognise no authority but that of Dáil Eirann, and the petty and quarter sessions courts are being deserted for our Republican Arbitration Courts. Government, in short, is actually being carried on by Sinn Fein, in all its branches. Raids, arrests, and shootings are continually carried on by the military and police. The barracks of the police are being burned to prevent their occupation by the military. Meanwhile we govern the country by the will of the people."

*Dublin Nurse.*—"I doubt if the General Nursing Council makes rules if the Sinn Fein nurses will register here. They will have nothing to do with an English Act of Parliament. You cannot realise our difficulties—we dare not say what we think."

## FIRE THEM OUT.

*Miss Anita Trueman (Manchester).*—"I heartily support Miss Simpson's plea that the B.J.N. should help to stop the disgusting practice of men caning school girls. It only proves the men who have to employ this barbarous treatment are unfit for their job. Let the authorities fire them out."

## OUR PRIZE COMPETITION.

## QUESTIONS.

*July 17th.*—What do you know of the methods by which tuberculosis is transmitted from one person to another, and the measures necessary for the prevention and eradication of the disease?

# The Midwife.

## THE MIDWIFERY CONFERENCE.

### AFTERNOON SESSIONS.

Miss Grace Vaughan presided at the first Session of the Midwifery Conference at the Royal Horticultural Hall, on June 24th, when the first paper, "Plain Words to Midwives," was presented by Miss Olive Haydon, who strongly maintained that post-certificate education is one of the most urgent needs of their profession.

Miss Elsie Hall followed, and urged midwives to organise with a view to improving the conditions under which they work and their inadequate pay, and expressed the view that organisation and better training would beget a better status for the midwife.

At 5 o'clock Miss E. F. Neville (Infant Welfare Centre, Middlesex Hospital) read an interesting paper on "Infant Welfare Work," in the course of which she enlarged on the suffering alleviated by skilled training. She referred also to the valuable training in mothercraft given at 29, Trebovir Road, Earl's Court, in Dr. Truby King's methods, where trained nurses are received for a three months' course, and spoke of the good which can be achieved by infant welfare workers in cases of difficult lactation of the district, by instructing the mother daily until she understands the method to be adopted.

### EVENING SESSION.

Miss Blomfield (Matron of Queen Charlotte's Hospital) presided at the evening session when three very interesting addresses were delivered.

### THE USE AND ABUSE OF DRUGS IN MIDWIFERY.

Dr. Gordon Ley, F.R.C.S., spoke first on the "Use and Abuse of Drugs in Midwifery." In regard to pituitary extract, he had, he said, given up using it for the purpose of stimulating the uterus in the second stage of labour. Some doctors gave it when the head was on the perineum instead of using forceps. After the third stage it was valuable in cases of oozing to secure contraction. Its abuse in the second stage led to (1) rupture of the uterus, and (2) the death of the child due to pressure from the forcible contractions of the uterus. Its administration hypodermically was sometimes useful prior to catheterisation. Morphine was, as a rule, only used in labour in combination with other drugs, to diminish pain, or in the treatment of eclampsia. Chloral hydrate in  $\frac{1}{2}$  drachm or drachm doses might eventually stimulate pains by enabling the patient to get a thoroughly good sleep, and, therefore, to renew her strength, and also by allaying the nervous symptoms which were so often a cause of uterine inertia.

Dr. Gordon Ley dealt at some length with twilight sleep, produced by repeated injections of morphine and hyoscine. Those who listened to

the revolting description of the conditions produced must surely have realised that it should never be had recourse to except under very exceptional circumstances, and explicit medical directions. It is not surprising to learn that there is a consensus of medical opinion against its use, and that it is dying a natural death. We sincerely hope so.

(To be concluded.)

## IRISH MIDWIVES AND FEES FOR CERTIFICATES.

Mrs. Marie Mortished, the Secretary of the Irish Nurses' Union, warns Dispensary Midwife Members, in the *Irish Citizen*, to be ready to act at once on any instructions the Union may have to issue.

There is trouble because the Irish Local Government Board have fixed a maximum fee of 2s. 6d. for signing maternity benefit certificates, and have, without replying to a letter from her Union concerning this limitation, again demanded of Nurse Collins (of Athy) that she should refund payments made to her for this service.

It will be remembered that the system in regard to dispensary midwives in Ireland is to pay them what may be regarded as a retaining fee—for it cannot be regarded as a living wage—for attending the poor law outdoor midwifery cases in a certain area, and to permit them to eke out their livelihood with such private practice as they are able to secure.

The position is—says Mrs. Mortished—that the Local Government Board admits these fees are a matter of private and not dispensary practice, and yet insists on fixing a limit to the amount a midwife may earn by private practice without consulting her Union, or, apparently, anybody at all.

The Irish Nurses' Union have, therefore, informed the L.G.B. that, if they carry out their threat and dismiss Nurse Collins without condescending to explain their actions in this matter, a situation may be created in which the Board will find it necessary to dismiss 250 other Dispensary Midwives as well.

Meanwhile the Union counsels its midwife members not to alter their usual custom in regard to charging for these certificates, but to ask for whatever fee they have been in the habit of charging.

## SUGAR CENTRES.

The new arrangements for the supply of sugar to Child Welfare Centres came into operation on June 13th. Permits for the extra ration will be issued direct by local Food Control Committees, and the present system will cease to operate.

# THE BRITISH JOURNAL OF NURSING

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Vol. LXV

## EDITORIAL.

### THE COLLEGE OF NURSING, LTD., AND THE STATE REGISTRATION FEE.

In June, 1916, the College of Nursing, Ltd., issued a prospectus, in which, amongst others, under the names of the members of its Council, it made the following pledges to induce nurses to enrol themselves on its voluntary Register:—

1. "If, therefore, you are on the College Register you will automatically and without further fee be placed upon the State Register when the Nurses' Registration Bill is passed."

2. "Because every nurse who is placed upon the College Register is *ipso facto* and without further fee a member of the College, and is entitled to vote for the election of the Council."

Every nurse whose name appears on the College Register has a right to the fulfilment of both pledges.

The first pledge—which should never have been made—the Council of the College is unable to keep, because Parliament declined to constitute the College of Nursing, Ltd., the Governing Body of the Nursing Profession, and to give its Register preference, as the State Register, in the Nurses' Registration Acts.

A frank and honourable recantation of its pledge would have been the right position for the College Council to have adopted under the circumstances. This it has not done, but the Chairman of the Company has issued a letter to members of the College, stating that "a Bill for the State Registration of Nurses was drafted by the College, in which it was provided that in the event of the College Bill becoming an Act of Parliament, all the Nurses on the College Register would automatically become State Registered Nurses without further fee."

Members of the College must not confuse the purely tentative provision included by the College Company in 1919 in a Bill which had little chance of being approved, and was not approved, by Parliament, with the definite pledge above-mentioned, given by it in 1916 as an in-

ducement to nurses to join the College of Nursing, Ltd.

Sir Arthur Stanley, in his circular letter to the members, states that "a certain number of nurses, when joining the College, *may possibly have been under the impression* that whatever Registration Bill became law they would automatically, without further fee, be placed on the State Register," and that therefore, on receipt of a letter from a member stating that she joined the College in this belief, "the Council is willing to pay such initial fee, not exceeding one guinea," when her name has been entered on the State Register.

We are advised that the Council of the College is legally bound to pay the fee charged for admission to the State Register for every nurse on its voluntary Register who applies for registration on the State Register and is accepted by the General Nursing Council.

Sir Arthur Stanley proceeds to say that "the payment of these fees, if demanded by a large number of members, will entail a heavy financial loss to the College," and that the Council "earnestly hope that those members who can afford to pay the fee for their State Registration will not think it necessary to claim back the amount from the College"!

Could audacity go farther?

We hope that members who claim the registration fee required by the State will not forget the second pledge given by the College Council, namely that they are, *ipso facto*, members of the College, and entitled to vote for the election of the Council. This is not affected by the Council discharging its legal obligation to pay the fee required by the General Nursing Council for registration by the State.

It is not the "financial loss" which will have the most damaging effect upon the College in this connection, but the example set to every member by its Governing Body—the Council—in attempting to repudiate its written word of honour.

## OUR PRIZE COMPETITION.

**WHAT DO YOU UNDERSTAND BY ANTI-TYPHOID INOCULATION? WHAT IS ITS VALUE? MENTION THE PRINCIPAL ABDOMINAL COMPLICATIONS OF ENTERIC FEVER, AND STATE HOW THEY SHOULD BE TREATED.**

We have pleasure in awarding the prize this week to Miss Winifred M. Appleton, University College Hospital, Gower Street, W.C. 1.

### PRIZE PAPER.

The method of preventive inoculation against typhoid fever was perfected by Wright for the protection of troops in the South African War and India, and has since been adopted as a routine Army measure.

Results show a marked protective influence against the occurrence of the fever in inoculated men, and when the disease develops mortality is considerably smaller than amongst the uninoculated.

Undoubtedly the more perfect the sanitary arrangements, particularly with reference to water supply, drainage and removal of sewage, the less likely the occurrence of enteric; but it is important for those unable to avoid risk of exposure to the infection to diminish susceptibility by inoculation by injecting a vaccine of dead bacilli Typhosus, subcutaneously, or intra-muscularly, with all antiseptic precautions, usually into the abdominal wall or the upper part of the arm.

To secure immunisation two doses are given, the first consisting of 500 million bacteria, the second, seven to ten days later, of 1,000 million bacteria. Some authorities recommend a third dose of 2,000 million bacteria.

It is advisable to refrain from strenuous work for two days after inoculation, as reaction is usually over by then.

Local symptoms present at the site of inoculation are redness, swelling, pain and tenderness. Constitutional symptoms may be malaise, nausea, loss of appetite, headache and feverishness.

In diagnosis, to differentiate between typhoid, typhus, para-typhoid or Mediterranean fever, the exciting organism is sought for by means of Widal Reaction, a test which particularly shows the agglutinative reaction of the patient's serum towards the typhoid bacilli.

After the second inoculation the agglutinating power of blood for typhoid bacilli increases about 300 times that of normal blood, the effect being at its height about three weeks after first inoculation, gradually diminishing until the protective influence passes off altogether in three to four years.

Inoculation should not be done on those

actually in the midst of an outbreak of enteric, because, for a short time after, inoculation enhances susceptibility.

Enteric is derived from the Greek word meaning the intestine, and is characterised by marked abdominal symptoms and the liability of serious complications developing in that region.

The bacilli produces inflammation of the lower part of the small intestine, lesions frequently forming near the ileo-caecal valve. Peyer's Patches are inflamed and swollen by infiltration of leucocytes, followed about the second week by sloughing and necrosis of tissues; in the third week the slough comes away, leaving ulcerated surfaces, and typical typhoid ulcers with undermined edges are formed; in the fourth week, if favourable, these begin to granulate, but healing is slow, and they leave no contraction in bowel wall.

The two most to be feared of abdominal complications are hæmorrhage and perforation, particularly in the third week.

Symptoms of hæmorrhage are:—

1. Sudden drop in temperature.
2. Increased pulse rate.
3. Aspect anxious and very pale.
4. Cold, clammy sweat.
5. Melaena.
6. Physical collapse.

*Treatment.*—Stop all food by mouth, elevate foot of bed, ice cap to abdomen, morphia or ergotin hypodermically, or opium per rectum, may be ordered and sometimes doses of chloride of calcium. Absolute rest and warmth are imperative. Rectal salines and feeds may be ordered in collapse.

Perforation symptoms:—

1. Sudden sharp pain in localised part of abdomen.
2. Fall of temperature.
3. Increased pulse rate.
4. Vomiting.

Immediate surgical treatment is required, laparotomy is done, the abdomen washed out, and the ulcer closed by suture. Cases operated on within twenty-four hours may recover, later it is rare. Before operation morphia may be ordered to relieve pain and diminish peristalsis. Tympanitis or distention is frequently present, and causes great discomfort. Apply turpentine stupes and give turpentine enemata.

The treatment of typhoid is mainly dietetic, because the alimentary tract is diseased. Nothing should be given likely to cause perforation, hence most doctors advocate fluids and jellies, with the addition of farinaceous foods (arrowroot, &c.) and whipped eggs. Feeds should be carefully graduated and regularly given to avoid distention and digestive disturbances.

Beef tea is sparingly used, because it may excite diarrhoea.

If diarrhoea is excessive, bismuth and opium or lead acetate and morphia, or an enema of starch and opium may be ordered. Enemas may be given every other day for constipation. No purgatives after first week. If motions are offensive an intestinal antiseptic, as salol, is sometimes given.

For bacilluria and cystitis, and for prevention of infection of others; urotropine mist. is used as directed during course of fever, and for three weeks of convalescence.

Peritonitis, with or without perforation, may occur. The liver, the spleen and mesenteric glands may be affected. In high fever the antipyrin group is dangerous to the heart, but aspirin (5 gr.) four-hourly may be useful, also the use of quinine and tepid sponging; the object of keeping temperature at even level is to relieve excessive waste and to tranquilise the nervous system and lessen liability of complication. Attendants must strictly adhere to general principles of typhoid nursing and disinfection and absolute cleanliness, with faithful observance of doctors' instructions.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Kate Ellis, Miss Dorothy Jean, Miss M. James, Miss P. Thompson.

#### QUESTION FOR NEXT WEEK.

What do you know of the methods by which tuberculosis is transmitted from one person to another, and the measures necessary for the prevention and eradication of the disease?

### NURSING ECHOES.

The *Journal Officiel de la Republique Française* announces that the *Medaille de la Reconnaissance Française*—Argent, has been awarded by the President of the French Republic to Mrs. Bedford Fenwick, with the following citation:—

"Mme. Bedford Fenwick (Ethel Gordon), de nationalité britannique; fondatrice de 'French Flag Nursing Corps' dont les infirmières diplômées, ont rendu de si grands services aux blessés dans les hôpitaux militaires; en plus, a largement payé de sa personne en visitant pour le comité les hôpitaux où sa compétence professionnelle étendue a beaucoup aidé au bon fonctionnement de l'œuvre."

The title "fondatrice" of the F.F.N.C. belongs to Miss Grace Ellison, who initiated the Corps in 1914. It was as professional Hon. Superintendent that we enjoyed the privilege of helping to relieve the sufferings of the heroic French soldiers throughout the war—splendid

patriots for whom we shall always entertain the profoundest veneration. To have come into personal touch with the inimitable "Poilu" during this searching test of character was to realise the height of human dignity. Further reward—though gracious—is superfluous.

Nurses of both sexes are eligible for the new French War Medal in commemoration of the war, which is to be awarded to all soldiers and sailors serving with the Colours or in the Navy between August 2nd, 1914, and November 11th, 1918. The medal will be of bronze.

Under these conditions all Sisters of the French Flag Nursing Corps will, we presume, be eligible for the medal.

The Queen Mary's Hostel at 194, Queen's Gate, S.W., is to be placed upon a permanent basis, and a meeting of the friends and subscribers will be held at the Hostel on July 28th. It is hoped to provide holiday hospitality in London, through its agency, to both military and civilian nurses. There are still a number of Sisters and Nurses with the Armies of Occupation, to whom a hostel is a much appreciated convenience on their return to England for a time, as well as nurses working in connection with the Serbian Relief Fund, the British Committee of the Russian Red Cross, and others. It is also open to nurses employed by the Ministry of Pensions, to Queen's Nurses, and to members of the Colonial Nursing Service. The Chairman is Captain Sir Harold Boulton.

It was reported at the annual meeting of the Essex County Nursing Association that many new developments had been under discussion, and it had been decided to increase the usefulness of the nurse midwives by allowing them to act as school and tuberculosis nurses, under the direction of the County Council officers. Twenty-two new centres had been added to the list of affiliated centres, 18 of these being entirely new associations. The Association had at present 105 affiliated local associations, and there were in addition, a considerable number of local associations in process of formation. As last year, the great difficulty now facing the Association was the lack of nurse midwives willing to do district work. There were large numbers of certified midwives in the county, but the great majority of these would not take up district nursing—(They show their sense.—Ed.)—they appeared to prefer institution or private work. Neither was it easy to get suitable candidates for training. The higher wages and better conditions now prevailing for women's work in

the industrial world made better educated women less anxious to enter a profession, and the nursing profession not having been very well paid, or much considered in the past, was now suffering from lack of candidates willing to join as nurses. The Council gratefully acknowledged the grant of £3,000 from the British Red Cross Association.

In our opinion it is quite indefensible to permit midwives to assume the responsibility of school and tuberculosis nurses. The majority are totally unqualified for this important work.

We are glad to hear there is a shortage of women willing to assume the responsibility of undertaking nursing duties for which they have not been efficiently trained.

We regret to hear that the Kingston Guardians have felt compelled to call for the resignation of the Matron for using their motor ambulance, without leave, to go to the "Derby," as she has been working very hard since her appointment in February last. Nevertheless, the use of this ambulance, which is reported to have been required for the sick, when not available, was a very serious offence, which could not be overlooked by the Board.

The following "ad." is from the *Daily Mail*, July 3rd:—

**W**ANTED for women's college in Oxford, a reliable woman to undertake parlour and portress work; one with some knowledge of nursing preferred; age 30-45; wages to be arranged.—Apply—

We cull the following from the *Morning Post*:—

**W**ANTED, V.A.D.'S and ex-V.A.D.'s to undertake Entire NURSING and DOMESTIC DUTIES in Sanatorium; salaries £30-£60, according to position occupied.—Apply—

Is it any wonder that probationers are at a premium?

For a Home for the nursing staff of the East Sussex Hospital, Nos. 11 and 13, Holmesdale Gardens, Hastings, have been made into one house, with only the garden wall dividing it from the site of the new hospital. About £500 has been spent in furnishing, and in this most efficient and economical way part of the hospital rebuilding scheme has been accomplished. There is accommodation for forty nurses and a domestic staff, the bedrooms numbering twenty-five with four bathrooms.

Visitors found comfort and brightness everywhere, and there is only the regret that it is not possible to give each nurse her own bedroom. Sisters only enjoy this privilege.

The premises, Nos. 29 and 31, St. Matthew's Parade, Northampton, formerly a school, have,

we hear, been admirably adapted for an up-to-date nursing home, which will compare favourably with any private nursing home in London or the provinces. The home is furnished throughout in a most tasteful style, and nothing has been forgotten which would add to the comfort and welfare of the patients. One of the features is a thoroughly equipped operating theatre.

Most of the doctors practising in this district were present at the recent opening, and the arrangements and conditions received their unqualified approval.

The nursing staff is an exceptionally capable one. The Lady Superintendent, Miss W. Lankester, is a lady of very great experience, who has earned the golden opinion of everyone with whom she has come into contact during the few months she has been here superintending the equipment of the home. This institution will undoubtedly meet a great need in the district, as people find it more and more impossible to be really ill at home owing to lack of domestic service.

The National Asylum Workers' Union took further steps to improve the position of its members at its sixth annual conference, held recently at Durham. It was reported that during the year the membership had increased from 13,905 to 17,720. The contribution was increased 100 per cent. to strengthen the funds of the Union.

A new wage scale for female nurses was drawn up as follows, with the addition of bonus and proficiency pay:—

Metropolitan: minimum, £3 5s. per week; maximum, £3 15s. per week. Industrial areas: minimum, £3 per week; maximum, £3 10s. per week. Rural areas: minimum, £2 15s. per week; maximum, £3 5s. per week.

It was resolved to press for the 48-hour week in all mental hospitals.

Mr. J. E. Swan, M.P. for Barnard Castle, expressed the hope that ere long all mental institutions, hospitals and infirmaries would be entirely controlled by the State, and financed and equipped by a Ministry of Health.

Birmingham was selected for next year's conference.

The impracticability of instituting an eight-hours' day for nurses in the Dublin hospitals at short notice was under consideration recently by the Dublin Corporation, when Alderman McWalter moved, and it was agreed, that the decision of the Council, making an eight-hours' day for nurses in the City hospitals a condition precedent to the payment of grants from the Council, be postponed for six months.



**THEIR NAME LIVETH FOR EVERMORE.**

The members of the Central London Sick Asylum (now the Colindale Hospital) Nurses' League, have done well to commemorate in the Nurses' Home of their hospital, the memory of three members of the League, trained in the institution, who died in the service of their country during the great war. The unveiling of a memorial tablet in their honour took place on July 2nd, in the vestibule of the Nurses' Home, Colindale Avenue, Hendon, the dedication service being conducted by the Archdeacon of Hampstead, assisted by the Rev. G. Farran, D.D., Vicar of Kingsbury, and the Chaplain of the Hospital.

The ceremony was performed by Mr. R. Woolley Walden, C.B.E., J.P., late Chairman of the Metropolitan Asylums Board, and now Chairman of its Sanatorium Committee, who said:—

"As chairman of the Committee responsible for the management of this institution, I have been honoured by being requested to unveil this memorial in proud remembrance of those nurses who died in the service of their country during the great war. Julia Winchester (drowned on the *Falaba*, May 27th, 1915); Mary Rodwell (drowned on the *Anglia*, November 7th, 1915); and Isabella Cruickshank (drowned on the *Salta*, April 10th, 1918). They gave the supreme sacrifice of their lives for their country, and this memorial will remind us, and those who come after, of their courage, self abnegation, and devotion to duty when the hour of trial came. They will live for evermore in the hearts and affections of those whose privilege it was to know them, and all of us unite in our gratitude to them for the splendid example they have set to the nursing profession, and indeed to all of us who are engaged in the work of caring for the sick and afflicted of our fellow countrymen. For they were faithful, true, and unflinching in their trust, they were noble and devoted women. They were a credit to and reflection of the noble women under whom they were trained, and whose devotion to duty is so well known."

When the Union Jack, covering the memorial was removed, it revealed a brass memorial plate upon a bronze tablet, surmounted by a cross, and the badge of the Nurses' League. On the plate are inscribed the names of the three nurses with the dates and manner of their deaths, and below the words: "Their name liveth for evermore."

A great tribute was paid to the work of the Matron, Miss Elma Smith, who has held that office for over twenty years, and letters were received from nurses trained by her, and those who had come in contact with them, from all over the world; many warm congratulations were offered to her on her recovery from her sudden and very serious illness.

Tea was then served in the nurses' sitting room, after which a meeting of the Nurses' League was held.

**THE MATRONS' COUNCIL.**

The Matrons' Council will not hold a summer meeting this July, owing to the absence on holiday of so many members.

Miss Winmill, the Matron of Queen Mary's Hospital for Children, Carshalton, hopes that the members will hold an autumn meeting at that interesting hospital towards the end of September.

The following members have consented to represent the Council at the Annual Congress of the National Council of Women to be held at Bristol in October:—Miss Catherine Terry, Matron of the Royal Mineral Water Hospital, Bath; Miss S. M. Marsters, Superintendent, Q.V.J.I., Paddington Branch, and Miss M. Kennedy, Superintendent, District Nursing Association, Clifton, near Bristol.

**THE GENERAL NURSING COUNCIL FOR ENGLAND AND WALES.****APPOINTMENT OF REGISTRAR.**

Dr. Addison, the Minister of Health, has sanctioned the appointment by the General Nursing Council (established under the Nurses' Registration Act, 1919, to form and keep a register of nurses for the sick) of Miss Marian Scott Riddell, R.R.C., to be the registrar of the Council.

Miss Riddell was trained at St. Bartholomew's Hospital, London, from 1901 to 1904, when she received the certificate of the hospital, and acted as Sister till January, 1905. Miss Riddell was appointed Night Sister, and subsequently Assistant Matron, at University College Hospital, which posts she held from 1905 to 1911, when she was appointed Matron of the Chelsea Hospital for Women.

Upon mobilisation in August, 1914, Miss Riddell was appointed Matron of the Second London General Hospital, Chelsea, and Matron of the 53rd General Hospital, France, in 1917, till 1919. In that year she was appointed a Principal Matron at the War Office, and rendered service as assistant to the late Matron-in-Chief, Dame Sidney Browne, T.F.N.S., until her successor, Dame Maude McCarthy, was recently appointed Matron-in-Chief, T.F.N.S.

Miss Riddell was awarded the R.R.C. (First Class), in 1916.

**THE STANDARD OF PUBLIC HEALTH NURSING.**

Lady Hobhouse, President of the Kingswood Nursing Association (which gives a short training to women to act as district nurses), in moving the adoption of the Report stated that when they started their organization they based it on the lines of one started at Plaistow by Sister Catherine, the idea of which was that it was possible to give as efficient training in a district as in the wards of a hospital. They were one of the first provincial

centres to adopt that system, but since then it had been practically adopted throughout England.

During the past year there had been created by the Government a General Nursing Council for the administration of the Nurses' Registration Act, and she had been nominated to sit on the Council. Registration in the future would be more difficult. Their difficulty had been that many young nurses did not care to go in for district nursing unless they could see their way to work up to the higher branches of the profession. Their idea in the Council was that the work of districts should be first considered and that district nursing should be a stepping-stone for some of the higher branches of the profession, notably the branch that went in for health visiting.

Lady Hobhouse may have been misquoted, but we feel sure we truly represent the opinion of the working nurses on the General Nursing Council, when we affirm that they would firmly oppose any suggestion to recognise the obsolete Plaistow scheme of classing experience in cottages as efficient training, such as can only be acquired by systematic teaching in hospital wards, and we at once question the statement that it is "the idea in the Council" to recognise any such retrograde step. The duty of the General Nursing Council is to organise an efficient curriculum of education, constituting trained nurses safe attendants on the sick, and to carefully provide that the poor shall have available in their cottages the same standard of nursing care as kings in their palaces. There is only one basis for such professional efficiency, and that is sound theoretical and practical teaching in hospital wards, on which to base special courses of experience in the district for public health nursing, and it is the duty of the well-trained members of the nursing profession, especially the Queen's Nurses, to keep the General Nursing Council straight on these principles, if it is the "idea" of the lay element to attempt to evade them.

#### THE ASSOCIATION FOR THE PROMOTION OF THE REGISTRATION OF NURSES IN SCOTLAND DISSOLVE.

A meeting of the Association for the Promotion of the Registration of Nurses in Scotland was held last week at 8, Drumsheugh Gardens, Edinburgh, when, in view of the passing into law of the Nurses' Registration Acts, the affairs of the Association were finally wound up. Sir James Affleck, who presided, said the Association was founded about eleven years ago, and from a very small beginning it had grown to have a membership of over 3,000. Having secured the objects for which they set out, they no longer seemed to have any reason for continuing as an Association. He had no doubt at all that it was due in no small measure to the advocacy which was carried on by their Association that a result was secured, which, although not entirely all that they would have

wished for, was a very satisfactory termination of the difficult and long-continued struggle on behalf of the nurses of the country. Dr. D. J. Mackintosh, honorary secretary of the Association, read an account of the work accomplished. Professor Glaister moved that, as they had come to the end of their usefulness as a body, the Association be dissolved, and the credit balance be handed to the treasurer of the King Edward VII Memorial Home for Nurses in Scotland. This was agreed to.

#### PRESENTATION OF MEDALS AT THE WESTMINSTER INFIRMARY, FULHAM.

An interesting little ceremony took place on Wednesday, July 7th, when the Chairman, Alderman Woolley Walden, C.B.E., J.P., and several members of the Committee, met in the Recreation Room of the Nurses' Home of the Westminster Infirmary, Fulham, to present the silver and bronze medals to the two nurses who headed the list in the final examination, which was conducted by Mr. L. S. Burrell, M.D., M.A., M.R.C.S. The pretty recreation room was gay with flowers and plants when the Matron, Miss E. J. Booth, and a large gathering of the nursing staff assembled there to see the presentations. Alderman Woolley Walden spoke of the good results of the final examination—twenty nurses out of a possible twenty-one being successful and gaining their certificates. He congratulated the staff and spoke most encouragingly of their work. The silver medal was gained by Nurse Margaret Jane Moore, who obtained 271 marks out of 300, and who got full marks for her *viva*. Nurse Annie Allen, with 261 marks, gained the bronze medal.

The two nurses were enthusiastically congratulated by the staff with hearty clapping of hands.

#### THE HOSPITAL WORLD.

Following are some of the chief grants made by King Edward's Hospital Fund in aid of London hospitals:—

London .. .. .	£35,000
King's College .. .. .	17,500
Great Northern Central .. .. .	12,000
St. Thomas's .. .. .	12,000
Metropolitan .. .. .	11,000
University College .. .. .	10,000
Middlesex .. .. .	10,000
West London .. .. .	9,500
Westminster .. .. .	9,500
St. George's .. .. .	8,500
Paralysed and Epileptic .. .. .	8,000
Sick Children .. .. .	8,000
Guy's .. .. .	7,000
Prince of Wales's General .. .. .	7,000
Queen's Hospital for Children .. .. .	6,500
Queen Mary's .. .. .	6,000
Royal Free .. .. .	6,000

This is an emergency distribution, to help the hospitals to carry on their work.

## EIGHT-HOUR DAY.

The Secretary of the Irish Nurses' Union states in the Press, in advocating an eight-hours' day for nurses, that the shortage of nurses is so serious that an English Matron has asked her to help her in securing 70 probationers, so that the eight-hours' scheme can be put into practice, and she adds: "The hospitals must find means to meet an increase in the cost of nursing just as they have to meet increases in the cost of drugs, clothes, food supplies, and so on. If they can only carry on at the expense of sweating their staff in a way no other body of workers would consent to be sweated, then the system is radically unsound, and the Corporation will be doing a public service if by attaching conditions to its grants it brings matters to a climax, and forces the deplorable condition of hospital finance upon the public attention."

## THE NATION'S FUND FOR NURSES, 1917—1920.

WE CALL FOR THE PUBLICATION OF THE AUDITED ACCOUNTS AND THE BALANCE SHEET.

The *Times* and the *Daily Telegraph* which have between them been running the mis-named Nation's Fund for Nurses since October, 1917, to date, would be wise to urge upon the Committees who received thousands of pounds, through the medium of their publications, to conform at once to the War Charities Act, and present for public consideration the audited accounts and balance sheets of the Fund.

The money has been raised in the name of the Nation's Nurses, and the Nation's Nurses have a right to know how it has been expended.

The fund is a war charity, raised under the Registration Authority of the London County Council, War Charities Act, 1916, and it is a matter for surprise that the L.C.C. has not made available the audited accounts of this fund, as it has done in analogous cases.

We call upon the *Times*, the *Daily Telegraph*, and the London County Council to compel Viscountess Cowdray and Miss Dora Fellowes-Robinson as the joint Hon. Treasurers of the Nation's Fund for Nurses, to issue without delay, detailed audited accounts and balance sheets of every penny subscribed by the charitable public to this Fund. What has been done with it? We intend to call for these accounts until we get them.

## WE DEMAND THE TRUTH.

Miss C. May Beeman, who has been helping to run the "Shilling Fund for Nurses" started by the *Daily Telegraph*, writes on the 7th inst. to the editor of the *Leicester Mail*, whose readers have contributed £570 5s. 1d. in response to the now notorious appeal:

"I should like to thank you most sincerely, on behalf of the nurses, for your more than generous help to our fund. I am sure those who so generously subscribed would be gratified if

they could know of all the hard cases" (including that of the elusive "Juliet," we presume) "that are now being helped by the 'Nation's Fund for Nurses.'"

Macmillan's nurses' paper, July 10th, states: "Many aged nurses, whose prospects are decidedly gloomy, unfortunately no longer enjoy the help of the 'Nation's Fund,' the limited money at its command being required for temporarily assisting ex-Service nurses."

Once again we demand the audited accounts of this Charity—how much the public subscribed, how has the money been spent, and by whom?

## APPOINTMENTS.

### MATRON.

**Municipal Maternity Home, Reading.**—Miss G. L. Burnett has been appointed Matron. She was trained at the City of Westminster Infirmary, Fulham Road, where she subsequently held the positions of Ward Sister and Maternity Sister.

**Teddington and Hampton Wick Cottage Hospital.**—Miss Elsie E. Bewsey, A.R.R.C., has been appointed Matron. She was trained at the Seamen's Hospital, Greenwich, and has been Night Sister, Theatre Sister, and Children's Sister at Bolingbroke Hospital, Wandsworth, and Sister at the Cottage Hospital, Englefield Green. She served for four years during the war as a member of Queen Alexandra's Imperial Nursing Service Reserve.

**Phthical Sanatorium, Maiden Law, near Lanchester.**—Miss Kathleen Madge Nelson has been appointed Matron. She was trained at the City Hospital, Birmingham, and the Royal Infirmary, Newcastle-on-Tyne, and has had experience in private nursing, and as Health Visitor at Newcastle.

### MASSAGE SISTER.

**Edmonton Military Hospital, N.**—Miss Martha Spooner has been appointed Massage Sister. She was trained at the West Bromwich Infirmary, and has been ward, theatre, and massage Sister at Fulham Infirmary, night Sister at Kingston Infirmary, second assistant Matron at City of Westminster Infirmary, and Sister in Serbian Military Hospitals, Salonica and Belgrade.

### INFANT WELFARE WORKER.<sup>1</sup>

**Borough of Richmond (Surrey).**—Miss Florence M. Fryar has been appointed Infant Welfare Worker. She was trained at the Buchanan Hospital, St. Leonard's-on-Sea, and has held various health appointments. She holds the certificate of the Royal Sanitary Institute, and is a certified Midwife.

## METROPOLITAN ASYLUMS BOARD.

### NURSING STAFF EXAMINATION.

At the examination of nurses held at the fever hospitals of the Metropolitan Asylums Board in April last, 59 candidates presented themselves, of whom 13 were trained nurses, 18 probationers, and 28 assistant nurses (class II). Of these, 10 trained nurses, 15 probationers, and 21 assistant nurses passed the examiners.

The Medallists were as follows:—*Gold Medal*, Miss S. Flynn, Park Hospital, 558 marks (out of a possible 600); *Silver Medal*, Miss M. Hartnett, North Eastern Hospital, 513 marks; *Bronze Medal*, Miss L. Linton, Park Hospital, 511 marks. Thus the Gold Medallist obtained 93 per cent. of full marks. A very high average.

## INTERNATIONAL NEWS. FROM THE UNITED STATES.

### A SILVER LINING.

Professor Adelaide Nutting's "daughters," the graduates, students and staff of the Nursing and Health Department, have commemorated the twentieth anniversary of the beginning of nursing work in the Teachers' College, Columbia University, by presenting her with a cheque for twelve-hundred dollars, to be used as the beginning of a fund for an Adelaide Nutting Historical Nursing Collection. This collection will consist of books, prints, pictures, and all kinds of material on the history of nursing. It will be housed in Teachers' College, and will be particularly for the use of students in the department; but it will also be open to other nurses who wish to consult it.

We are proud to know that the whole file of sixty-four volumes of *THE NURSING RECORD* and *BRITISH JOURNAL OF NURSING* have been secured for Teachers' College, so that the weekly history of English nursing from the year 1888 is at the disposal of American nurse students, together with the twenty volumes of the *American Journal of Nursing*. We have returned the compliment by securing the eighty-four volumes for English nurses interested in the history of their profession. When those of us who have helped to make nursing history have passed away, the "silver lining" to our crimes may shine forth from bourgeois and brevier. It was a very merciful judge who said, "I look for a silver lining to every crime before pronouncing judgment."

### RANK FOR SERVICE NURSES.

The Bill for the reorganisation of the United States Army, including rank for nurses, passed the Senate in April; and another Bill, on the same subject, has also passed the House, but neither of these Bills has passed the House and Senate. They have been referred to a Committee, and eventually will be reported back. Rank for Nurses in the United States has, therefore, not yet become law.

Canada still remains the only country which has accorded rank to its military nurses.

### ARMY SCHOOL OF NURSING.

It has been decided to put the Army School of Nursing on a permanent basis with the headquarters at the Walter Reed Hospital, Washington. Rank for Service Nurses will necessitate the most efficient instruction by permanent specialists in the pay of the Army, in preparation for executive work in Army hospitals in times of peace and war.

### DIRECTOR OF PUBLIC HEALTH NURSING.

The Johns Hopkins Nurses *Alumnae Magazine* publishes an excellent photograph of Miss Elizabeth G. Fox, one of its graduates, who after a brilliant Public Health Nursing career, has been appointed Director of Public Health Nursing, American

Red Cross. Don't forget the American Red Cross has a highly organised professional nursing department attached at Washington, of which Miss Clara F. Noyes, a great nurse leader, is director; so that first-class women are naturally promoted—as they should be—to fill all responsible professional positions.

### DRAMATIC IN THE EXTREME.

Heading her letter "Decoration Day in U.S.A., and holiday dating from Civil War Times, flowers to graves of military and all other dead," Miss L. L. Dock writes to the Editor:—

"DEAREST DYNAMO,—How wonderful! What a dream—like sensation of a living melodrama!! I really think your experience in making your long untiring pioneer search, and in seeing its results won, and in knowing yourself set upon the First Nursing Council, and in having public recognition brought to you in the very same house and room where the first quest was launched, so long ago—is very remarkable, is very unusual, and is dramatic in the extreme. Not least dramatic is the removal of Sir Henry Burdett at the very moment when, in a novel, or on the stage, he would depart. I hope in these words there is no malice towards the dead. I was just getting ready to forgive and forget all!!

"I venture to guess there were good things at that tea!"

Miss Dock loves our English teas. How we wish she would come across and take a "dish" of that delectable beverage with all her affectionate old friends!

### SAXIN.

Nurses who were afforded the privilege of visiting the exhibition held in connection with the meeting of the British Medical Association Meeting at Cambridge were specially interested in a graphic demonstration of the supreme sweetening power of "Saxin," described as "the sweetest thing on earth." A vase containing 400 lumps of sugar (a small fortune in itself nowadays!) was exhibited side by side with a tiny bottle of 200 "Tabloid" "Saxin" gr.  $\frac{1}{4}$ . As each  $\frac{1}{4}$ -grain "Tabloid" "Saxin" is equivalent to two ordinary sized lumps of the finest loaf-sugar, the contents of the large vase and the tiny bottle were equal in sweetening power. "Saxin" is harmless, and passes through the system unchanged.

### MEDICAL SUPPLY ASSOCIATION, LTD.

Matrons of hospitals and child welfare clinics, as well as individual nurses and midwives, will do well to note the very reasonable terms on which fitted maternity bags, scales for weighing infants, and other necessities in their work, are supplied by the Medical Supply Association, Ltd., 167-185, Gray's Inn Road, London, W.C. 1. Its steam sterilizer for dressings is also widely used, and greatly approved.

## OUR FOREIGN LETTER.

## FROM DR. ANNA HAMILTON, MAISON DE SANTÉ PROTESTANTE, BORDEAUX.

DEAR EDITOR,—I have so many things to tell you that I have postponed writing for want of time to write a long letter.

We have very much rejoiced at the triumph of your Cause; our nurses are so pleased that your thirty years' fight has ended with victory.

It seems incredible that an English nurse we had here recently, had never heard of the Registration campaign, and was surprised that we were so much *au courant* with it all. Neither had she ever heard of Miss L. L. Dock!

We have the great privilege of having Miss Elston for three months at the head of the Children's Department. We all enjoy so much having her with us.

In the B.J.N. of April 24th you very kindly mention the American Nurses' Memorial Fund which is being collected in America to be given to us to build our Nurses' School, and that it was voted with enthusiasm at the Atlanta Convention to reach 50,000 dollars (£10,000) with which at present rate of exchange we shall be able to build a fine school, with 50 small rooms for pupils and 12 for the staff, a splendid hall, the Amabel Roberts' Library (memorial to a nurse of the Presbyterian Hospital, N.Y., by her Alumnae), a large lecture room, a big dining-room to hold small tables. There will be two terraces on the roof.

Miss Clara Noyes, President of the American Nurses' Association, has instructed me to have the architect prepare the plans because as soon as the whole sum will have been collected, we must be ready to show the plans to Miss Alice FitzGerald and Miss Helen Scott Hay, who will be responsible for approving them. I am sure when our nurses are in the beautiful home at Bagatelle, a great many will come to train with us.

I have never told you of the splendid donation of 250,000 francs given by the father of one of our nurses. The Committee were asked to sell Bagatelle (the beautiful estate left by the late Mlle. Bosc to the Maison de Santé Protestante) for that sum. I was in despair and told many people about it. . . . Thus the father of a nurse heard about it, and wrote he would give the same sum of money on condition the estate was not sold. He lost a son—killed in the war—and the other became tuberculous and died after having been in awful military hospitals. This gentleman wants to help girls to be well trained as nurses, by having a really nice, well-equipped school, and hopes that many more well trained nurses will help to reform the military hospitals by-and-bye. It is a self-made fortune he is giving us—made by his own personal work. Is it not grand?

This gift made it necessary that our hospital should be moved out of the city to Bagatelle. It has been such a relief to me to feel that, happen

what may, the trustees can no longer be urged to sell Bagatelle.

We shall be able to do such wonderful work there. We shall have a great many more patients, as we are to have 200 beds; our hospital will always be full, as we shall receive patients of all creeds. The dispensary in that part of the town can deal with twice the number of patients. We are to build a solarium for children with plasters. Later, we hope to build a block for well babies, and a crèche also. At last we will try to build a sanatorium for T.B. cases, so as to get them out of their homes when contagious, thus saving the family. Our nurses do district work all over the town, and many more might be kept very busy.

The town permits us to go into the public schools and we have begun the work in two only. The others beg for nurses. We have such splendid opportunities. I am longing to begin it all.

This spring we made an experiment with six lectures on the "History of Nursing" on Saturday nights. The nurses mended their stockings listening, and then they had a nice tea. They were greatly interested. Next year we hope to have a fortnightly lecture, and a much extended programme all through the winter. In the report I am sending you you will see the statistics about the nurses' work and also my report on my visit to the United States."

We warmly congratulate Dr. Anna Hamilton that after arduous years of struggle her dream of a Florence Nightingale School of Nursing, placed on a sound financial basis at Bordeaux, has come true. We have told our readers of the spirited pioneer work of this wonderful woman, whose school we have often visited. We have told them of the romance of Bagatelle, and now, once more, those wonderful Powers influenced by longing and will have responded, and Bagatelle is safe. We do hope we get an invitation to the opening of the new school, made possible by the unity and co-operation of American nurses, as a memorial of the 284 nurses of the American army who died during the war. We think it would be very fitting that our National Council of Nurses should make a gift on that great occasion. Moreover, if Mlle. Minot would take domestic pupils, what a grand opportunity for an Isla Stewart pupil to be initiated into the *ménage* of a French hospital and nurses' commissariat. As the Isla Stewart Memorial Fund now has an income of £30 per annum, we must see what can be done in the future. Never shall we forget the Bordeaux *ménus*!

## COMING EVENTS.

July 19th.—National Union of Trained Nurses. "Unemployment Insurance," by Miss Florence, Secretary, Women Clerks and Secretaries' Friendly Society. 46, Marsham Street, Westminster, S.W.

July 21st.—Concert at 10, Downing Street, by kind permission of Mrs. Lloyd George, in aid of St. Bartholomew's Hospital. Viscount Sandhurst will preside.

## THE ROYAL SANITARY INSTITUTE.

The Thirty-first Congress of the Royal Sanitary Institute will be held at Birmingham from July 19th to 24th, under the presidency of the Right Hon. Viscount Astor, and will be an important and impressive occasion.

The programme, which, beginning with matters affecting the birth-rate, contains some sixty other subjects, includes matters affecting Child Welfare, Housing, Industrial Hygiene, Still Birth, Clean Milk, the Reconstruction of Slums, and the care of the lonely and aged poor. The one subject which apparently has not a place on the programme is Nursing.

On Tuesday evening, July 20th, Sir Frederick W. Mott will lecture at the Midland Institute on "Body and Mind," and the popular lecture on "Links with the Tropics," illustrated by lantern slides, will be delivered at the same place on Thursday evening by Dr. Andrew Balfour, C.B. C.M.G., B.Sc., D.P.H. There will also be very enjoyable social functions.

## BOOK OF THE WEEK.

### "SHEPHERD'S WARNING."

This delightful pastoral story will commend itself to those who appreciate delicate touch and fine workmanship. There are in it abundance of charming little pictures and descriptions of rural life which strike a very natural note and make very soothing and pleasant reading.

Old Bob Garrett lived along of his three "widdied children."

"They 'ent exactly his children as you might say. They call him dad, and don't mind anyone else of the name. He is their grandad to speak accurate. They was his boy Sam's youngsters, and Fred, the youngest of them, killed his mother when he come. A fine hearty gal she was. But there, you never know how 'twill be. Bob finds it as much as he can do to get himself a bit of 'bacca with they youngsters in his house like so many cuckoos. You won't see him down at 'The Gate' not above twice or thrice in a twelve-month; not but what he enjoys his glass, same as anybody else do."

Bob's cottage adjoined that of "Old Hammer and Tongs," so named from the constant and noisy quarrelling of the couple who lived there, and whose disputes ended in tragedy, which left their only child, elfin little Sally, an orphan.

Bob took her in along of his youngsters for a time. "Liddy will let her slip into her bed."

Another aged inhabitant of the village was Luke Medlar. With his weathered face, his old blue eyes, and the fringe of snowy whiskers which surrounded his face and chin like an inverted halo, he looked a kindly and gentle old man; but his heart was bitterly jealous of his neighbours, of their cottages, and particularly of their

gardens. Always well able to ingratiate himself with his betters, he had succeeded in receiving the seals of office as gardener and odd man at the vicarage, and keeper of the churchyard. Often when he was wanted at the vicarage for some tedious operation—such as beating carpets—it was learnt that the grass in the churchyard was in a terrible scabby state and could not last over Sunday without being trimmed, which meant that Luke potted about with a pair of shears for a short time, only to find that it was necessary for him to slip across to his cottage for a few shakes—an elastic period that often lengthened into a good morning's work at thinning onions. His whole life became subservient to his garden.

Luke was not above transferring the vicarage plants to his own plot, and the vicar's wife would sometimes comment on the similarity of his blooms to those which she had provided for her own garden.

"You always had a wonderful eye for flowers, 'm," Luke would answer with respectful admiration. "But what you say is true. They be the same nemesies. But they was so ett up by the spindle fly. 'Be as 'twill, they'll do for your little plot," I says to myself. 'Tent as if it was the vicarage.' You see, 'm, I *got* to make things do." Luke and Bob's youngest grandson, Fred, became fast friends, drawn together by their common love of nature, and in due course became his recognised helper.

As Sally grew into a tantalising and fascinating girl, she became a source of trouble in old Bob's humble cottage. Though he had befriended her in trouble, he had no mind to see either of his boys take up with her.

When Sally Dean looked back over the eighteen years of her life, it was hard for her to discern the time when Bob and Fred Garrett had not shared it. At first regarding them as merely friendly souls in a hostile land, she found that as the months passed she not only attracted the two boys, but was herself attracted by them. The playing off of the two brothers against each other by Sally provides the romance of the book.

The final picture of old Bob left lonely in his cottage with his cat, in spite of the invitation of his married children to make his home with them, is a pathetic one.

The old man was silhouetted against the light in the kitchen, a tall bent figure in a round hat leaning on a stick. "Jinny! Jinny! Where ha' you got to?" Then when the truant emerged, self-contained and unhurriedly from the darkness, a note of endearment crept into the tones. "Why, there you be! Come along, old gal." H. H.

## A WORD FOR THE WEEK.

Believe in yourself, believe in humanity; believe in the success of your undertaking. Fear nothing and no one. Love your work. Work, hope, trust. Keep in touch with to-day. Teach yourself to be practical and up-to-date and sensible. You cannot fail.

\*By Eric Leadbitter. London: Allen & Unwin.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

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## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE WIDOWS AND GRAVES OF HEROES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—There are two departments of Salvation Army Service, which, I believe, may be unknown to many of your readers who might be glad to take advantage of the facilities offered.

(a) For the convenience of relations wishing to visit the graves of their loved ones laid to rest in France and Belgium, a department has been opened under the direction of Mrs. Commissioner Higgins, which is prepared to assist in securing the location of the graves, to arrange the passports, issue the tickets from London to nearest railway station to the cemetery, meet passengers in London and at ports of embarkation and landing, and, if necessary, arrange motor transportation to cemetery.

The department has hostels in London, Boulogne, Calais, Arras, Ostend, Ypres, Amiens, Rouen and Havre. The rates are the cheapest possible—no profit is made.

Full information can be obtained from Mrs. Commissioner Higgins, International Headquarters, 101, Queen Victoria Street, London, E.C. 4.

(b) Lieut.-Colonel Ewens of the Widows' Counsellors Department at the same address, will be pleased to help, up to the limits of our power, any widow who is in difficulty irrespective of creed or circumstances. Amongst those who have already been helped are many war widows for whom pensions, increases and adjustments have been secured.

I am, yours sincerely,

THEO. H. KITCHING, *Commissioner.*

101, Queen Victoria Street, E.C. 4.

## FOR THE SAFETY OF THE SICK.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—You may remember my writing to you in 1918 about the awful catastrophe to our hospital, which was destroyed by fire. We are rebuilding under very difficult circumstances, owing to the adverse rate of exchange, and the high rate of labour and building materials. The night of the fire the pressure of water was so low, the firemen could not get the water up to the flames. The outside buildings are now finished, but no fire insurance society will take over the buildings unless the water supply is sufficient, which it is not. The engineer of the Public Works Department has examined the pressure and says the water supply can be improved, but at the cost of £100. Also the electric station has been brought to Rainawari, and we do not want oil lamps again, after the awful experience of the drum of oil being upset and the lamp broken.

The laying on the electric light installation will cost £53 10s. 4d. If we can get this done in six months from April 1st the State will make us a free gift of the electric current. Could you, of your charity, make an appeal in the BRITISH JOURNAL OF NURSING for donations from those who read your valuable journal, and as a thank-offering from them for having gained what you, and all right-minded nurses, have been labouring for, for so many, many years. The money could be sent to me through our Secretary, Church of England Zenana Mission Society, 27, Chancery Lane, London, W.C. stating that it is for the water and electric lighting at Rainawari Medical Mission, Srinagar, Kashmir. If readers of the B.J.N. can help ever so little we shall be grateful. The bedsteads for the hospital have arrived and the blankets are on their way, a free gift from Queen Mary's Needlework Guild. £150 is a large sum to ask for, but we feel sure it will come in some way.

Yours,

E. M. NEWMAN.

C.E.Z. Mission Dispensary,

Rainawari, Srinagar, Kashmir, India.

### KERNELS FROM CORRESPONDENCE. NURSING AND HEALTH NOT PARTY QUESTIONS.

*Miss Isabel McClymont, Lawmuir, N.B.*—“It seems advisable, now that the Registration Society has dissolved, that a Parliamentary Section be formed in one of the existing Societies or the Professional Union—a political wing often forms part of a trade union; already Miss MacCallum has been using persuasion in the lobbies with good result. Many of those from the old Society have strong T.U. sympathies, they might with their past experience develop a strong political wing by joining the Professional Union. Of course nurses must pay for their independence—the fact that they have formed a successful T.U. is proof that they realise this; but it behoves them to make the money go as far as possible and use existing societies and offices.”

[The Registered Nurses' Parliamentary Council will be, as the Society for the State Registration of Trained Nurses was, entirely free from Party politics, and trades unionism is associated with the Labour Party. Nursing is not, in our opinion, a Party question at all. It is the duty of every Party to promote the efficient nursing of the sick and the health of the people, and it will be the duty of the Council to instruct all political parties in this matter, so far as trained nurses are concerned, as the State Registration Society did so successfully on the Nurses' registration question.—ED.]

### OUR PRIZE COMPETITION. QUESTIONS.

*July 24th.*—State what you know of uræmia. To what are the symptoms due? What are the essential points in the management?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

(Concluded from page 351.)

The following candidates from provincial training schools were successful at the examination of the Central Midwives' Board, held on May 4th :—

### PROVINCIAL.

*Aldershot: Louise Margaret Hospital.*—N. Cowpe, F. B. Goodall, G. D. Shephard, D. M. Staniland.

*Aston Union Workhouse.*—S. K. Hardy, E. M. Howell, C. Williams.

*Birkenhead Maternity Hospital.*—M. L. Appleton, M. Barlow, M. E. E. Hillsdon, M. E. M. Parsonage, S. J. Wood.

*Birmingham Maternity Hospital.*—F. E. L. Berry, A. M. Bowen, G. Clark, C. Donnelly, A. V. M. Edwards, G. M. Eslick, R. M. Evans, M. Johnson, L. M. Jones, H. Little, M. McCaskell, B. S. Martin, E. Ogram, I. M. E. Parkerson, M. Pedley, E. M. Richards, E. Ryan, C. F. Stewart, E. Tomlinson, G. Wilding.

*Bradford Union Hospital.*—M. Livingstone, J. Mowat, D. C. Wall.

*Brentford Union Infirmary.*—E. Bowen, E. Williams.

*Bridgwater District Nursing Association.*—K. A. McGirr.

*Brighton Hospital for Women.*—E. M. M. Alexander, L. A. Auld, M. T. Brameld, D. Chadwick, C. E. L. Cooke, L. M. Gardner-Brown, L. M. Hearn, B. R. Miller, B. M. Smyth, D. M. Spencer, V. M. Verity.

*Bristol: Eastville Workhouse Infirmary.*—M. Hammond, E. A. Williams.

*Bristol General Hospital.*—E. F. Complin, P. Levy, P. F. Morton, M. A. Walters, S. Williams.

*Bristol Royal Infirmary.*—E. R. Byrt, C. M. M. Messenger, H. A. Pattullo, C. C. Wiseman.

*Carlisle District Nursing Association.*—M. Gillam, M. E. Johnston.

*Cheltenham District Nursing Association.*—M. Griffiths, A. A. Hemmen, N. E. Jones, V. M. Pearson.

*Chester Benevolent Institution.*—E. E. Deacon, L. M. Thompson.

*Covey Union Infirmary.*—D. F. Hutchings.  
*Croydon: St. Mary's Hostel.*—M. Britten, V. L. H. Reakes, M. Reilly, D. L. Rollo.

*Darwen District Nursing Association.*—S. A. O'Connor.

*Derby: Royal Derbyshire Nursing Association.*—D. A. Albon, F. E. R. Beynon, E. A. Bowler, A. Cousions, A. D. Crocker, F. East, S. M. Goadby, C. M. Hayes, M. Jarvis, M. B. Livingstone, E. Nicklin, K. A. Peat, A. S. Wilson.

*Devon and Cornwall Training School.*—E. Bees, R. E. Carter, B. J. Dayman, G. H. Denslow, R. E. Fry, C. H. Ham, E. L. Hopper, M. Howarth, G. M. M. Irons, A. Kershaw, M. A. O'Leary, E. Pearson, L. Tomlinson.

*Devonport: Alexandra Nursing Home.*—E. L. Franks, B. E. Liddy, A. E. Liley, F. M. Phillips, E. H. Pope, L. Scott, D. L. Woodhouse.

*Essex County Nursing Association.*—F. Alger, D. M. Anderson, E. Craddock, M. S. Edwards, A. Knight, A. M. Sadgrove, A. A. Whitlock, M. A. Wraith.

*Gateshead Union Hospital and Newcastle-on-Tyne Union Hospital.*—E. M. Burgess, I. Kirk.

*Gloucester District Nursing Society.*—M. M. Davies, L. A. Hopkins, A. Lewis, C. Williams.

*Halifax District Nursing Association.*—E. Whittton.

*Hastings District Nursing Association.*—M. C. Kirk, I. B. Roy.

*Herts. County Nursing Association.*—A. M. Bishop, S. F. Cooper, D. E. R. Ellis, P. H. Featherston, A. J. Pierce, S. K. Peck.

*Huddersfield District Nursing Association and Huddersfield Union Infirmary.*—M. E. Green.

*Huddersfield District Nurses' Association.*—E. Jackson.

*Hull Lying-in Charity.*—M. A. Dales, M. C. Merrylees, A. E. Thomas, E. M. Wonters.

*Hull Municipal Maternity Home.*—E. Fletcher, M. A. Webster.

*Ipswich Nurses' Home.*—L. A. Bowyer, M. J. Brooks, R. G. Moffat, M. Partington, E. White.

*Kingswood District Nursing Association.*—N. Allen, M. E. Thomas.

*Leeds Maternity Hospital.*—A. Campbell, A. Harvey, F. Oates, M. Rogerson, E. A. Rowat, M. Scott, I. I. Smith, A. Wier.

*Leicester Maternity Hospital.*—C. E. Beamish, H. B. Davies, E. K. Elliott, J. M. Owen, M. J. Stuart, D. Vernon, M. Winterton.

*Leicester Union Infirmary.*—C. Blackledge, G. E. Jarrett, B. M. Phillips, E. Wilford.

*Lincoln City Maternity Home.*—A. M. Duffill, F. E. East, A. Pickford.

*Liverpool Maternity Hospital.*—R. Babbs, M. Bocking, E. Carr, L. A. Carroll, I. Corrin, J. Dawson, A. Done, A. R. Furber, M. Gaffney, A. H. Harris, B. Hosker, A. G. Jones, M. E. G. Jordan, E. M. McCormick, A. C. Platt, E. Pogue, I. Shingler, E. Sturdy, L. E. Warrior.

*Liverpool Workhouse Hospital.*—A. M. Ennett, C. Leacy.

*Manchester, St. Mary's Hospitals.*—L. M. Austin, E. Clarke, M. Dearden, E. Flack, C. E. Fletcher, F. Hilton, E. Hughes, D. D. Johnson, M. M. Johnson, L. Moodie, S. A. Moody, J. C. Perrie, M. Swindells, F. N. Taylor, E. Todd, L. Waterhouse.

*Manchester Union Workhouse.*—W. France.

*Manchester Workhouse Infirmary and St. Mary's Hospitals, Manchester.*—M. E. Shacklock, M. Williams.

*Newcastle-on-Tyne Maternity Hospital.*—M. H. Brogan, E. Douglass, M. Henderson, E. T. Hogg, M. A. McDonald, P. A. Melvin, E. M. Plater, E. Robinson.

Newcastle-on-Tyne Union Hospital.—E. Harrison, S. T. Lawson, E. Lowerson, E. P. Phillips.

Northampton, Q.V.N.I.—E. G. Gregg, K. E. Harrison, L. M. Jeans, E. Moss, K. Rosser, E. Spillane, S. A. Tideswell.

North Brierley Inf.—E. E. Barker, E. E. Dixon.

Nottingham Workhouse Infirmary.—A. E. Allen, G. F. Berridge, N. Bennett, K. Tunncliffe, L. Wetton.

Norwich Maternity Institution.—M. Turle.

Oldham Union Infirmary.—M. H. Holroyd, L. A. Watson.

Preston Union Workhouse.—E. Collinson.

Royal Hants County Hospital.—E. D. St. J. Camies, J. T. Scott, W. J. Vigar, S. F. Wright.

Selly Oak Union Infirmary.—L. Bailey, E. Fisher, T. Hollingworth, M. W. Monk, M. H. Watts.

Sheffield, Jessop Hospital.—M. Ash, J. McA. Brown, A. Compton, J. S. Gunn, H. A. Hunt, D. Lee, L. D. Rowntree, E. R. Wallbank.

Sheffield Union Hospital.—L. V. T. I. Coward.

Staffs Training Home for Nurses.—E. M. Addison, F. Davies, A. Davies, E. Frost, E. M. Johnson, L. Marshall, C. Munro, H. C. Smith, S. E. M. Smith.

Sunderland Union Workhouse.—S. G. Milner.

Sunderland District Nursing Association and Anita Richardson Maternity Home.—N. E. Scott.

Tynemouth Union Hospital.—M. Cowell, A. E. Hutchinson, L. Wignall.

Wakefield Maternity Hospital.—T. O'Brien.

Walton, West Derby Union Infirmary.—L. G. Bishop, M. E. Donegan, M. Duncan, I. Fowler, L. McNair, G. Riding.

Windsor, H.R.H. Princess Christian's Maternity Home.—A. H. Ivin.

Widnes, Queen's Nurses' Assoc.—E. G. Jones.

West Riding Nursing Association.—E. Glover, E. Hawksworth, T. H. Worth.

Wolverhampton District Nurses' Home.—B. V. Higgs, A. E. Knowles, A. M. Perry.

Worcester County Nursing Association.—L. H. Harris, A. Johnson, A. M. Nightingale, A. E. Whitehouse, A. P. Williams.

York Maternity Hospital.—K. Duncanson, M. E. Good, G. M. Marson, M. T. Palmer.

#### WALES.

Cardiff, King Edward VII Maternity Hospital.—E. A. Christmas, M. E. Lewis, E. Roots, C. S. Thomas, E. A. Thomas, S. White.

Cardiff, Q.V.J.N.I.—E. A. Olley.

Merthyr Tydfil Union Infirmary.—A. C. Anthony, E. L. Pearce.

Monmouthshire Training Centre.—A. Taylor, E. A. Thomas.

#### SCOTLAND.

Dundee Maternity Hospital.—H. E. Webster.

Glasgow Royal Maternity Hospital.—M. N. Galbraith, A. M. Haswell, S. Owen, M. C. Roberts.

Edinburgh Royal Maternity.—F. Jenkins.

Edinburgh, The Hospice.—E. S. Newton.

#### IRELAND.

Dublin, Rotunda Hospital.—V. M. Brindley.

## MIDWIFERY CONFERENCE.

(Continued from page 28.)

### THE MOTHER THE ONLY SAFE ENVIRONMENT FOR YOUNG BABIES.

The concluding speakers at the Midwifery Conference at the Royal Horticultural Hall, on June 24th, were Dr. Eric Pritchard and Miss M. Liddiard. Dr. Pritchard prefaced his remarks on his own subject—the environment for young babies—by referring to Dr. Gordon Ley's address on "Twilight Sleep." Looked at from the point of view of the infant he could not agree that it was not detrimental to the child. There might not be many babies born dead, whose mothers were under the influence of twilight sleep, but they were born with morphia in their systems, which was detrimental to them both at birth and after.

In regard to the safest environment for the young infant, Dr. Pritchard stated that babies are born absolutely sterile, but when launched into the world they are bound to meet infection. The majority of babies who die in the first few months of life do so because they are unable to withstand infection, which may enter their systems through the skin, the mucous membrane, the mouth, the nose, the anus, the vagina, and the stump of the umbilical cord.

Everyone, said Dr. Pritchard, is infested with millions and millions of micro-organisms, and the reason why people do not become infected is because they cannot penetrate the skin, or if a few do they get killed when they get through the first layer. The blood is full of anti-bodies to microbes. The newly-born infant has not learned to kill microbes, and is protected because it carries in its system its mother's blood. Therefore, so long as the infection it has to meet is that which the mother has to meet, it has in its blood anti-bodies which enable it to resist the particular infections to which it is exposed, and it is safest when it remains close to its mother, nestled up against her.

As the infant grows it uses up the blood supplied to it by its mother, and has to manufacture its own blood supply; therefore it becomes less resistant to germs. Nature has, however, provided a method whereby the infant's blood may be reinforced against infection. An infant should subsist on its mother's milk, and it has been proved that this contains reinforcements which being taken up into the child's blood, protect it from infection. It may be easier to manage artificial feeding, but the mortality amongst hand-fed babies is always much greater than amongst breast-fed infants, simply because the mother's milk supplies to the child what the purest, and best cow's milk cannot do—the means of defending it from the danger of infection before it has developed its own power of self defence. The explanation of the fearful mortality in institutions where young infants are segregated is that although fed on cow's milk pure in quality, it does not contain immunising bodies.

(To be concluded.)

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## EDITORIAL.

### "A SUBSTANTIAL PENALTY."

When the nation takes into its charge classes of persons, who have thus no means of self-protection, it rightly enacts laws to safeguard those for whose welfare it assumes responsibility—infants, minors, feeble-minded, and especially the insane. For the tragedy of the last class is that while, for their own benefit and that of the community, they are placed under care, they are removed from public observation, and therefore from the protection afforded by public opinion, and, at the same time, from the nature of their complaint, arising from a disordered brain, they are often difficult to deal with, requiring sympathy, tact, wisdom, and patience. Indeed, patients suffering from mental diseases require the very highest type of men and women to attend them, both as regards personality, and trained skill.

This fact was not always appreciated. There are now in the museum at Bethlem Hospital a collection of implements formerly in use in that institution, which are instruments of torture rather than remedial agents for the treatment of the sick in mind. The words "asylum" and "keeper" indicated the attitude of mind of the public to these poor people. Remedial treatment was not the object of institutions for the insane so much as their restraint. Even in the highest circles the keeper had almost absolute power over his unfortunate patient, and it is on record that when George III. transgressed, his keeper knocked down that unfortunate monarch "as flat as a flounder."

The present stage of evolution is one of remedial treatment. Attendants and nurses are trained to give mental patients nursing

care, the employment of physical force in dealing with them is recognised not only as cruel, but as stupid and unscientific, and all those employed in the care of the insane are strictly prohibited from striking or maltreating them, under the regulations of the Lunacy Board of Control.

It is, therefore, inexcusable for a nurse to use physical force in dealing with a refractory patient, as in the case of an unfortunate woman at the Brookwood Mental Hospital recently, the sequel to which was the prosecution, at Woking Police Court, by Mr. K. G. Thomas, acting for the Surrey County Council, of Anna Elizabeth Matthews, a former nurse at the hospital, for alleged ill-treatment of this patient. The defendant admitted having smacked the patient's face, but denied ill-treating her. Evidence was given by the chief nurse that she saw the patient sitting on a form, her hands being held by a nurse, while Nurse Matthews, who was standing behind her, struck her three or four blows in quick succession on the head and neck. The medical superintendent, Dr. J. A. Lowrie, deposed that he found bruising on the back of the patient's neck, and there was blood on her clothing.

The Chairman of the Bench said they would be failing in their duty if they did not impose a substantial penalty, and fined the defendant £5, which appears to us totally inadequate in view of the gravity of the offence, especially as this is only one of several similar cases which have been reported in the press recently. If sentences of imprisonment were passed when helpless patients are cruelly assaulted, it might have a deterrent influence and protect other patients from such assaults.

We do hope that the General Nursing Council will do all in its power to raise the standard of mental nursing in every way.

## OUR PRIZE COMPETITION.

WHAT DO YOU KNOW OF THE METHODS BY WHICH TUBERCULOSIS IS TRANSMITTED FROM ONE PERSON TO ANOTHER, AND THE MEASURES NECESSARY FOR THE PREVENTION AND ERADICATION OF THE DISEASE?

We have pleasure in awarding the prize this week to Miss Henrietta Ballard, Sister, Northern Fever Hospital, Winchmore Hill, N.21.

### PRIZE PAPER.

*The germ of Tuberculosis*, known as the "Bacillus" is present in excretions of those persons suffering from the disease, in Pulmonary Tuberculosis the sputum contains many of these germs, which are very minute, red, rod-shaped bodies, so that infection may be conveyed by the act of spitting, and once the sputum become dry and mingles with the dust of the road or house, many persons may be infected through the air. Other parts of the body may be infected with the disease, spine, long bones, brain and internal organs, frequently causing the formation of large abscesses which secrete an enormous amount of pus, containing the germ, and, in intestinal tuberculous, diarrhœa, causing incontinence of the fœces, is often present.

*Contact*.—The hands of the person attending such cases may convey infection, either by contact with dressings, soiled linen and clothing, and the patient himself.

Kissing and inhalation of the patient's breath must be regarded as infectious.

*Clothing* must always be suspected, whether from patient's body or bed, as the germs may be transmitted by patient coughing up sputum and using a handkerchief instead of spittoon, and thus infecting everything coming in contact with the handkerchief or hands of patient.

*Food*.—Milk is very quickly infected by the air-borne germs, which contaminate its cream.

Any food having been in patient's room must be destroyed to insure no other person partakes thereof.

### Prevention of Infection.

All persons suffering from Tuberculosis must be given plenty of fresh air, and should not be allowed to share a bed or room with a healthy person, or any other, if possible.

*Pulmonary Tubercular* patients should be provided:—

(i.) with gauze or paper handkerchief, and these must be burnt after use.

(ii.) With a spittoon, in which carbolic 1-20, or its equivalent, has been placed, and this must be emptied two or three times daily and contents burnt if possible and vessels sterilised.

(iii.) A pocket, detachable and made of a material which can be boiled or disinfected, should be pinned in a convenient place on the patient's clothing, and, into this, spittoon-flask and handkerchief should be placed and patient forbidden to spit in any other place than vessel provided, and handkerchiefs not to be placed elsewhere.

In the case of bed patients it is better to have the ordinary mug with detachable lid, and a clean dish on the table for the handkerchief.

All rooms used by patients should have floors and furniture that can be well washed and disinfected.

*Utensils* of patients, especially those used for feeding, must be kept scrupulously clean, and used for no other person, boiling for twenty minutes or disinfecting after use is most essential, and feeders with spouts need specially cleansing with brushes.

*Clothing* of patient and bed should be soaked in strong disinfectant for at least an hour before washing.

*Hands* of all in attendance must be scrubbed well in soap and water and disinfected after attending to patient.

*Food* and vessels used for same should be kept as far from patient as possible, and protected from the greatest of germ carriers, the common house fly.

*Milk Cans*, if left dirty, give a delightful feeding ground for germs, and should be immediately emptied, cleansed thoroughly, and turned upside down till again used, and then kept covered with a clean cloth to prevent contact with infected air.

### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss A. M. Burns, Miss S. F. Rossiter, Miss Violet Cooper, Miss P. Thompson, Miss M. James.

### QUESTION FOR NEXT WEEK.

State what you know of uræmia. To what are the symptoms due? What are the essential points in the management?

## A TRIBUTE TO TWO HEROINES.

In the presence of the Queen of the Belgians, the British and United States Ambassadors, M. Jauson, the Minister of National Defence, the Burgomaster of Brussels and the local authorities, a monument was unveiled on Friday, July 16th, at the Belgian Nursing Institute in Brussels in memory of Nurse Cavell, and Mme. Depage, who perished on the "Lusitania." M. Jauson paid a tribute to the two heroines on behalf of the Belgian Government.



## NURSING ECHOES.

We would reassure several ardent registrationists who have written to us on the subject, that as soon as the Rules drafted by the General Nursing Council have been approved by the Minister, they will be laid before each House of Parliament forthwith for twenty-one days, when they will be available for consideration. Our correspondents may feel assured, that the members of their free organisations who have the honour to be members of the Council, will most earnestly endeavour to safeguard their interests in every particular.

Mrs. Bedford Fenwick, President of the Registered Nurses' Parliamentary Council, 431, Oxford Street, London, W., will be pleased to hear from members of the Nursing Profession who approve of, and are prepared to work for Rank for Service Nurses. Now that the members of the Canadian Army Nursing Service and the American Army Nurse Corps have both been given the requisite status, insignia and authority, as officers, to enforce orders for carrying out their instructions, it is time we petitioned the Home Government to grant such rank to our own Service Nurses.

The Dowager Lady Airlie held an "At Home," on July 15th, at 3, Grosvenor Place, supported by Dame Ethel Becher and Dame Maud McCarthy, to discuss a scheme for establishing a United Nurses' Services Club. Lady Airlie said that the idea was a response to the wish expressed by nurses who worked in France, and she was convinced that Queen Alexandra would do everything in her power to forward it. Sir Alfred Keogh supported the proposal, and Sir Anthony Bowlby said that if the club could be started free from debt it would run itself. Other speakers urged that such a central meeting place was badly needed by nurses, and should be run on the lines of a first-class residential ladies' club, and at least twenty bedrooms would be required.

No doubt such a club would be very popular. The only question in these days is the matter of expense. To run it on the lines of a first-class residential ladies' club would in London necessitate an annual subscription of from £4 to £6. Men pay £10 to £20, and pay for smokes and wine. We are glad, however, to hear an effort is to be made to organize such a club for nurses, and wish it all success.

*John Bull* asks: "Who is responsible for holding up the nurses of the 24th Stationary

Hospital, Kantara, Egypt? They have been out there for nearly three years without home leave, and though they signed their demobilisation papers two months ago, they are still held up. Plenty of boats leave for home, but the berths are all taken by civilians and officers' wives who have only been out for the winter. The nurses are already in a poor state of health; to keep them at their posts of toil is a positive cruelty. These slaves of duty have well earned the right to be released at once." Surely *John Bull* realises how all-powerful social influence is where working women (even the "nation's noblest") are concerned? What action is the Nursing Board at the War Office taking in this connection?—Or perhaps it knows nothing about it?

Miss Woodward, M.R.B.N.A., who receives a few paying guests in her home at Redhill, is removing to the next house, "Esperance," 164, Station Road, Redhill, Surrey. The house is within easy reach of churches, shops, post and telegraph office, and the beautiful common. The comfort of those not strong is specially studied. Inclusive terms per week are £2 5s. or £2 10s., according to the bedroom which is occupied.

*The League News*, of the Bradford Royal Infirmary Nurses' League, for 1920, appears in a dainty buff cover, and is full of interesting matter. The late Matron, Mrs. Meredith, writes the Foreword, in which she says: "We are justly proud of the splendid service of the Nurses during the war, and the true history of all the help they rendered, and the hardships that many of them uncomplainingly endured, can never be told. . . . It is more than ever necessary that Nurses should proceed with their work with the same energy and high ideals as during the war, and on every side the field widens. The schemes introduced by the Ministry of Health should open many fresh avenues of nursing employment, and our Nurses will require to be thoroughly well equipped with greater knowledge if they are to take up successfully the greater responsibilities that the future will bring."

The President, Miss Jessie W. Davies—so well known as an expert trainer of nurses—announced that the nursing staff, with the aid of the Ladies' Committee, are organising a grand bazaar, to be held early in November, in aid of the funds which are so much needed for the extension of the Nurses' Hostel at Field

House; the proposed enlargement will provide additional accommodation for 66 nurses, and will thus enable the whole staff to enjoy the necessary extra off-duty hours. The League hopes to make its fancy stall the stall of the function, and 75 per cent. of the takings are to be allocated to the League funds. All the help possible is invited from members. This stall is sure to be a great success—we all know what nurses can do when they have a mind to! The extracts from members' letters are full of information. They fly home from Montreal, Northern Rhodesia, Wellington, N.Z., and Baghdad. Royal Infirmary Bradford Sisters are carrying their skill far and wide—greatly to the benefit of mankind, we have no doubt.

The monthly issue of *The South African Nursing Record* always interests us immensely. The medical Editor does not, of course, always see eye to eye with us in the *finesse* of professional journalism, and quotes the commercial, lay edited home nursing papers as professional opinion! This by the way, but on the whole we recognise that our medical confrère has the good of our profession at heart. The question of whether midwives who are not general trained nurses have any right to be members of the South African Trained Nurses' Association has cropped up again. Some nurses disapprove of it, but the Editor, referring to a nurse's letter on the question, writes: "Another letter in this issue claims a word from us. It is that dealing with the subject of midwives and the T.N.A. It again is eloquent of the split that threatens to nullify all our efforts. It is utterly impossible to think of running two Associations. We must have only one, complete and undivided. We do again plead for unanimity and for harmonious working. No useful purpose can possibly be served by any two nursing sections getting up against each other, and we, as Editor of this journal, and neither a nurse nor a midwife, are in the position to appreciate the grave danger of any such split."

Our professional opinion is that if Trained Nurses and Midwives agree to form an association, its title should make this plain. We must claim that Trained Nursing is a profession on its own (we hope in the future it will include midwifery as medical education does), and that experience in midwifery does not constitute a woman a trained nurse, any more that it qualifies her as a general medical practitioner. We suffer greatly in England from the assump-

tion that certified midwives with a smattering of nursing are trained nurses—a standard accepted by the laity running county and rural Nursing Associations for the poor on the cheap, and we are looking forward to the time when our Registration Act will protect us from this injurious system. Trained Nursing and Midwifery are equally honourable professions for women, but they are distinct professions at present, and should not be confused in the public mind with one another. Nor should one cover the other with the resulting economic competition. How about male midwives being associated with general medical practitioners? Unthinkable, of course. This is just where the *finesse* of professional opinion counts.

At the opening of V.A.D. Headquarters at Leicester, it was announced that included in the work will be the formation of a Register of Qualified V.A.D.'s to assist the district nurses if required, or to help at the local hospitals in case of emergency; and to prepare plans for the immediate establishment of an emergency hospital if required.

The Hours of Employment Bill is not likely to be debated in Parliament until the autumn, and we learn that it is probable that the Minister of Labour will call a conference of representatives of the Nurses organisations to hear what they have to say as to being included in the Special Order. The College of Nursing, Ltd., together with the British Hospitals Association, are, we believe, working together against an eight hours day or 48 hours week, and urging that 56 hours weekly work should be the minimum for nurses. This is the result of so-called nurses' societies managed by powerful employers and their senior officials. Not that we are a very ardent advocate of nursing by the clock—but such questions should be settled by the workers themselves in consultation with employers—and not by the employer and his foremen for the worker.

## THE PROFESSIONAL UNION OF TRAINED NURSES.

### MEMBERS PLEASE NOTE!

The monthly meeting of the Public Health Section of the Professional Union of Trained Nurses, will be held at 17, Evelyn House, 62, Oxford Street, W.1, on Friday, July 30th, at 5.30 p.m.

## RANK FOR ARMY NURSES ACHIEVED IN THE UNITED STATES.

THE BRITISH JOURNAL OF NURSING offers its warm congratulations to the American Army Nurse Corps, upon whom Rank has been conferred by the passing of the Jones-Raker Bill at Washington.

Mrs. Helen Hoy Greeley, the eminent Counsel, whose devotion to their cause has helped so materially to win this victory for Army Nurses in the States, reports in the *American Journal of Nursing* :—

"The Jones-Raker Bill for Rank for Nurses is now law. On May 27th the Conference Committee reached a final agreement on all issues of Army re-organisation, and made their report, which contained the following sentence: 'The provision for the relative rank of nurses was agreed to, it being contained in both Bills.' The report was agreed to by the House on May 28th, and by the Senate on May 29th. On June 4th the President signed the Bill, which went into effect immediately.

"The Conference Committee used the phraseology of the original Jones-Raker Bill with the exception of the last clause. For this it substituted the sentence: 'The Secretary of War shall make the necessary regulations prescribing the rights and privileges conferred by such relative rank.' Such language occurs frequently in Army and Navy legislation, and I am advised that it is hardly likely to be construed unfavourably to our interests.

"To the hundreds of persons, nurses, doctors and lay persons, who by their unselfish and spirited co-operation have made this law, the National Committee to secure Rank for Nurses proudly acknowledges its indebtedness and gives unmeasured thanks."

Once again we have a splendid object lesson resulting from the unity of the Nursing profession in America. In their great professional sisterhood there is no room for "pundits" and "superior persons." Superintendents are chief nurses—and associate themselves with whole-hearted zeal with their fellow nurses for the common good, and with unflinching instinct the rank and file pick out their leaders and honour them accordingly.

This roll of honour now includes the names of a long list of women who have devoted their great talents to the common good, without thought of reward or distinction, and whose selfless work is known and appreciated throughout the world: Linda Richards, Isabel Hampton-Robb, Anna Maxwell, Lavinia L. Dock, Isabel McIsaac, Sophia Palmer

Georgia M. Nevins, M. Adelaide Nutting, Annie W. Goodrich, Lucy L. Drown, Mary M. Riddell, Jane Delano, Clara P. Noyes, Helen Scott Hay, Sarah E. Parsons, M. Helena McMillan, Sarah E. Sly, Anna Jammé, Louise Twiss, Isabel M. Stewart—and coming along, a band of equally fine women of a younger generation, in whose hands the honour and progress of their profession is secure.

It is a liberal education to have met many of these "stars" and to be associated with them, through honorary membership, in their National organisations.

## HIGHER PENSIONS FOR NURSES DISABLED IN THE WAR.

### ROYAL WARRANT.

A new Royal warrant, dated July 2nd, has been issued for the retired pay of officers (Army) disabled and for the pensions of the relatives of officers deceased, and for the pensions of nurses disabled and of the relatives of nurses deceased, in consequence of the Great War. The warrant is published as a command paper (Command 811) and as a special Army Order, and is obtainable from His Majesty's Stationery Office, price 2d. net. It takes effect as from April 1st, 1920.

In the case of such persons whose claims to retired pay, pensions or gratuities have been dealt with or arose under previous Warrants the terms of the new Warrant may, if more beneficial to them, and subject to the provisions of the Fifth Schedule, be applied with retrospective effect from the above date.

### NURSES DISABLED OR DECEASED.

A member of Queen Alexandra's Imperial Military Nursing Service, of the Army Nursing Service Reserve, and of the Territorial Force Nursing Service, who retires on account of medical unfitness certified as either attributable to or aggravated by military service during the war and not being due to her serious negligence or misconduct, may be granted the pension shown in the Third Schedule to the Warrant which corresponds to the degree of her disablement as certified.

A Principal Matron, or Matron-in-Chief, totally disabled will receive a pension of £210, a Matron £180, a Staff Nurse or Sister £150, if not entitled to Service Retired pay. The addition to Service Retired pay if entitled to such is £90.

When a permanent pension has been granted it will not be altered on account of any change in the nurse's earning capacity, whether resulting from training or other cause, with certain exceptions.

Pensions or gratuities may be awarded to the relatives of deceased nurses in accordance with the terms of Articles 18 to 22 of this Warrant so far as they may be applicable, and under such conditions as the Minister may determine.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## MEETING OF THE GENERAL COUNCIL.

The first meeting of the General Council, subsequent to the annual meeting, was held on Thursday, 15th inst., at 5.15 p.m. The Hon. Officers were re-elected and the following were elected to fill vacancies on the Executive Committee, subject to their consenting to act:—Medical men: Dr. Belfrage, Dr. Domville, Dr. Courtenay Lord, and Mr. Oppenshaw; Matrons: Misses Brey, Bushby, Steuart Donaldson and Ford; Sisters and Nurses: Mrs. Stewart Murray, Misses Ayres, Bennett and Wise.

The Council had before it, among other business, correspondence with the Ministry of Labour, with which had been forwarded the scheme of the College of Nursing, Ltd., in relation to the Hours of Employment Bill upon which the Ministry had invited observations from the Royal British Nurses' Association. This scheme provides that the maximum working hours for all nurses should average 56 per week, but the Council of the Association decided to adhere to previous recommendations, sent to the Ministry of Labour, to the effect that the maximum working hours per week for all nurses in hospitals and institutions should be forty-eight per week, and that it was not to the best interests of private nurses that there should be restrictive legislation as to their hours of work, as this would tend to militate against the employment by the public of highly-qualified private nurses.

## THE ORGANISATION OF HOME NURSING.

Speaking recently at a meeting at the offices of the Royal British Nurses' Association, at which Miss Cattell was in the chair, Miss H. G. Klaassen urged nurses to give their minds as soon as possible to the organisation of home nursing. She spoke from the consumers' point of view, seeing life through the eyes of a social worker, and from this point of view she saw many signs that there will be a re-organisation of district nursing combined with better provision for the needs of the middle-classes.

With regard to district nursing she could not speak too highly of her appreciation of the work of the Queen Victoria's Jubilee Institute. The voluntary nursing associations had provided

nursing before the working-classes and country people had enough knowledge to realise its value. To-day, largely owing to the war, there is a considerable knowledge of the benefits to be derived from skilled nursing and people are more ready to pay for it. It is also true that there is great difficulty in raising money for carrying on the work of the voluntary associations. The cost has increased, while, from the same causes, the subscribers can less well afford their subscriptions.

Many voluntary associations which used to give free nursing are beginning to make charges.

The rich get good nursing in their own homes, and the poor get excellent nursing in institutions where they act as clinical material for the education of doctors and nurses. The middle-classes cannot afford the charges of the whole-time resident nurse, which are now very high, and justly so.

People have a good deal of commonsense and prefer to spend limited means on food and fresh-air and all that keeps them well before they put aside money for problematic illness. Unless skilled nursing is really within their means they will get on as well as they can without.

For all these reasons it is urgently needed that an effort should be made to organise nursing in such a way that it works out economically.

The methods of the "Queen's Nurses" are extremely efficient and economical and are worthy of the attention of those nurses who nurse paying patients. Private visiting nurses are to be found in many towns, but there is need of organisation before visiting nurses can be entirely successful in supplying the needs of a town.

The report of the Consultative Council on Medical and Allied Services is extremely interesting in connection with this subject. The need for organisation in the interest of the middle-classes is recognised. At present the public are not getting at all full advantage of the scientific discoveries of the last epoch.

The Council propose that a Special Committee should consider the subject of nursing services. Now is the time when thought given to the subject of the organisation of home nursing will bear fruit.

If nurses fail to take interest in the matter they will be organised by the doctors and consumers, and have little voice in their own affairs.

A long discussion took place at the close of Miss Klaassen's excellent address.

There will be no further Saturday afternoon meetings at Orchard Street until the holidays are over, but we hope to commence these meetings again in October and we shall be very glad to hear from nurses who will be willing to address them.

### CATFISH.

A lively argument recently took place on the steps of the hall leading to the Midwifery Conference between a strong supporter of the College of Nursing and some members of the organised societies of nurses. The former told us that she was sending us a letter setting out views on the necessity for unity, and although the postman has, up to the present, neglected to deliver the missive, courtesy presses us to proceed with its reply. During the conversation alluded to the College member, whilst stating that she was quite in favour of a Trade Union for Nurses, and thought it a good thing, held strongly to the view that all hope for the profession lay in "unity," forgetting that in this very imperfect world there must of necessity be destruction as well as construction, that you cannot build good out of evil, and that, to use the words of one great writer, "all progress is strife to the end." With infinite perseverance she advocated her view that each society "should keep to its own work" and should refrain from interference with, or criticism of, the College of Nursing, Ltd. She was evidently quite blissfully ignorant of the fact that her College, instead of proving itself an educational body, had not merely interfered with the functions of the organised societies but had tried, backed by social influence and the so-called Nation's Fund for Nurses, to usurp those functions altogether with such amendment as would secure a sort of feudal domination for the employers over the workers. As to criticism it was pointed out that, if methods of raising money such as some which had been introduced into the profession by the College supporters, were persevered with, the profession could not hope to hold the respect which it formerly has had from the British public generally. Various delinquencies were enumerated by the independent nurses, among them "the Juliet appeal." "Ah, but that was a mistake," pleaded our friend apologetically. "Yes, but you thanked Lord Burnham for making the mistake in your Annual Report," came the quick retort.

Thinking over the episode later, we were irresistibly reminded of a paragraph in one of the works of Charles Marriott, where he tells of an ingenious North Sea fisherman who, finding that the cod in his tanks arrived at the market in a flabby condition, hit upon the expedient of introducing into each tank a catfish, with the result that its fellow-travellers—the cod—always arrived at their destination with their muscles in good order owing to continual stimulation by their unwelcome companion. If, therefore, the ethics of the College of Nursing are inclined to grow flabby,

as it gives us every reason to believe, the day may yet arrive when its members will look back with gratitude to the societies for their efforts to stimulate its directorate to a more robust and independent standard of conduct.

We were struck by the remark of one working nurse, on the interview above referred to, "Surely all members of the College Council cannot approve of its disingenuous methods. If only each person, each member of the profession, would fight each bit of evil as it meets her, there would not be so much left for us to fight." But they don't; hence the catfish! There are in the nursing profession, as in the community generally, those so developed that they consider one standard of ethics as the only legitimate one, while there are others who claim that, for the group, a lower is permissible, or at least they permit the world to believe that they do. Doubtless each member of it feels that she may shift her responsibility on to her neighbour, and, when the catfish probes, would fain plead with it to keep to its own corner of the tank and allow the peaceable cod to keep still in theirs that peace and unity may reign in the tank. But this may not be, for, percolating through the soul life of the universe, bringing its strange psychic force to bear now here and now there, is ever "the queer, unpleasant, disturbing touch of the Kingdom of Heaven."

### QUEEN ALEXANDRA'S HOSPITAL FOR OFFICERS REUNION.

A very delightful evening was spent at 9, Upper Wimpole Street, on July 8th, when Mrs. Herbert Paterson, the wife of our popular Hon. Medical Secretary, was at home to old patients, and to those who had been on the nursing staff of Queen Alexandra's Hospital for Officers, Highgate, during the years of war. About eighty patients were present, many having come to London from long distances in order to attend; among them one from the extreme north of Scotland.

The entertainment was exceedingly varied and as was fitting, several artistes contributed who had been well-known and much appreciated on somewhat similar occasions in the old days at Highgate. Miss Varrick's songs were as amusing as ever, but none of her new ones surpassed in popularity that old favourite of the Q.A.H.O., "Mike's Bike." Miss Glover's singing also met with the old hearty appreciation and Mr. Stannard's topical song, narrating supposed episodes in the lives of the two chief pundits of the Q.A.H.O., excited great amusement. There were a number of lightning drawings by Mr. Todd and a display of lantern slides showing various aspects of the hospital and a gallery of hospital photographs in the large consulting room. Dancing lasted from 11.30 p.m. till 2 a.m., the music being supplied by a contingent of the band of H.M. Royal Horse Guards.

(Signed) ISABEL MACDONALD,  
Secretary to the Corporation.

10, Orchard Street, W. 1.

## THE WORK OF THE MINISTRY OF HEALTH.

### DISEASE PREVENTION.

When the House of Commons went into Committee of Supply on Thursday, July 15th, Dr. Addison, the Minister of Health, moved "that a sum not exceeding £17,572,797 be granted to His Majesty to complete the sum necessary to defray the charge which will come in course of payment during the year ending on March 31st, 1921, for the salaries and expenses of the Ministry of Health, including grants and other expenses in connection with Housing, Grants to Local Authorities, etc., sundry contributions and grants in respect of Benefits and Expenses of Administration under the National Insurance (Health) Acts, 1911 to 1919, certain Grants in Aid, and certain Special Services arising out of the war."

In moving this resolution, Dr. Addison reminded the Committee that this was the first time the estimates of the Ministry of Health have been presented to it, and that during the first year of its life the Ministry of Health collected to itself a number of other Departments, so that it could proceed to consolidate in one Department all those interests concerned with the preservation and promotion of the public health, and also, so far as possible deleted from the work and the consideration of this Department, matters which are foreign to that purpose.

He referred, at the outset of his speech, to the serious loss which the Ministry has suffered in the first year of its work through the death of Sir Robert Morant, "who was at all times a loyal and trusted friend, a great servant of the public, and, besides this, was an example to us all of self-denying, far-sighted, resolute patriotism."

Dr. Addison mentioned as services which had been amalgamated during the course of the year those relating to the Health Insurance Department, the Registrar General, the work of the Board of Education in regard to school medical services and prospective mothers, the work of the Home Office under the Children Act, and—a very important branch of the public service—the Board of Control, which deals with the whole question of lunacy and other minor services.

### THE SIGNIFICATION OF THE MINISTRY OF HEALTH.

The Ministry, said Dr. Addison, is, or ought to be, or ought to grow into a Ministry of Health, and that word had a very wide signification. It entered into every home, and every life, from the first day to the last, and it was clear that a sound health policy would require time and patience for its development. The first essential in a well-defined health policy was the spread of good, common information for, after all, the foundation of many of our possibilities was in the home, and in the house.

### THE PRINCIPLE OF PREVENTION.

Then any sound system must be based upon the principle of prevention. So far as possible all our schemes must be designed with that dominant intention. It was in that respect that we had not hitherto made as much progress as we ought to have done, and it was with that idea running through his mind that he was going to put before the Committee a record of some of the branches of the work of the Ministry.

### THE NECESSITY FOR AN ADEQUATE SUPPLY OF TRAINED PERSONS.

The Minister proceeded to say that any proper development of a preventive health service must depend upon an adequate supply of trained persons, and there was, at present, in many branches a serious deficiency. It would take time to remove that want. You could not produce a trained staff—nurses, midwives, and so forth, in the course of a year. He was quite sure that we should often be spending our time and money in vain, unless we rested on a well thought-out scheme, administered by people who knew what they were wanting to do.

Then, any systematic preventive scheme of service must offer fairly full facilities for dealing with early disability, and, above all, it must have at its service at all time an active prosecution of scientific research. The preventive services we have developed in this country had, up to the present, so far as they related to the surroundings of individuals, reached a stage of development beyond that of any other. Our sanitary services, so called, were well developed, and it was largely owing to them that the health of our people, who in many cases dwelt in most pestilential places, was as good as it is, and it was from this point of view—that of dealing with the surroundings of the people—that the housing work, which was only one of the many activities of the Ministry, although it bulked largely in the public eye, must be regarded.

### A TEST OF SUCCESS.

Dr. Addison called attention to the point that in so far as the Ministry of Health was really successful, and as, in course of time, its services became more complete, and yield a better result, the less obvious and the less striking they will be. Nobody, when he went about his daily life, felt particularly grateful for the men who have swept out malaria. It did not occur to him. It was not objective. That was an essential feature of all preventive services, and therefore, as time went on, and the development of schemes became more successful they would become less objective, and bulk less in the public mind, and the less they did so the more successful they would be.

### THE PREVENTION OF DISEASE.

The Minister reported the success of the sanitary cordon drawn round the country at the time of the demobilisation of great numbers of troops, when vast tracts of Europe were devastated by disease,



and the first anxiety of the Ministry was to secure the country from invasion by them.

In regard to tuberculosis, in no disease was it easier to spend money unwisely than in combating tubercle. A large number of people went into sanatoria, were maintained there at great expense for a long time, and went back to home surroundings where they became re-infected, and who then tried to enter the competitive labour market and broke down. The result was a disappointment to them, loss of public money, and sorrow to all concerned. We now had a dispensary system developed to a certain extent, but no dispensary system would be successful in preventing tubercle, and no sanatoria would wipe out the disease, whilst people had to live crowded in unhealthy dwellings. We had to bring the conditions of the home within the scheme, otherwise it was quite useless to expect the eradication of the disease.

It was also essential to provide training centres in connection with the sanatoria, and as it was useless to expect the patients when trained to enter into competition in the ordinary labour market, to establish village colonies. Dr. Addison gave two instances of such colonies where the men work at trade union rates and very largely support themselves.

#### VENEREAL DISEASES.

Another set of diseases, of an exceedingly lamentable character with which the Ministry was dealing energetically was venereal diseases. There was no branch of service in which it was more necessary than in this to have a trained personnel. It was not enough simply to have centres for the treatment of venereal disease, and it was in order that the Ministry might keep abreast of progress in this matter that he asked Colonel Harrison, who did brilliant work during the War, to join his staff, with others, and to help to organise this Service. There had been a substantial increase in the persons attending venereal centres. The total had gone up from 460,000 to 843,000. It meant that people were beginning to realise the necessity of going to the centres early. The scheme was, so far, only at the beginning.

There was a tendency amongst certain protagonists to fall upon one another in regard to the method of dealing with this disease. He exhorted them to fall upon the disease.

#### THE EARLY TREATMENT OF MENTAL DISORDERS.

The war had shown that properly directed efforts could cut short a great number of cases that otherwise would develop into mental deficiency of a permanent kind. It was necessary, and the Ministry was working out plans clearly to provide, that in any future arrangements the authorities should be able to deal with mental cases while they were at an early stage, to avoid their being labelled lunatics. The war had shown conclusively that this could be done with conspicuous success, and it was the Ministry's

business, now that it was dealing with matters affecting the Lunacy Board of Control, to try to secure the development of a system designed for the early treatment of mental disorders.

#### THE NECESSITY FOR TRAINED NURSES AND MIDWIVES.

In no matter was it more important to have a trained personnel than in questions affecting the charge of mothers. Hence the importance of maternity and infant welfare homes. Early in the year the Minister said it was clear to him that the thing necessary for success was to have trained personnel at their command in the way of nurses, midwives, &c. Therefore, it was arranged with the Board of Education to have additional grants for training for health visitors, midwives, &c. They had been taken up very extensively. At present there were 700 midwives under training under the scheme, and the number of centres where this supervisory work was carried on had increased from 1,400 to 1,600.

The development of these services throughout the country, in nursing, midwifery, and other facilities, and the combination of the whole big effort had been able to reduce the infant mortality in 20 years from 151 to 78 per thousand. It was a striking performance.

But this was only an index figure. It was to the good not to lose so many, but the point was that those who survived were better nourished and more likely to be useful members of the community hereafter. The fall in the child death-rate had been continuous, and it was still falling.

#### THE MEDICAL EXAMINATION OF SCHOOL CHILDREN.

This improvement had not yet made itself sufficiently felt in the children who go to school. Although the Ministry was developing the medical service as energetically as possible, of the first 750,000 children examined in our schools last year, 40 per cent. were still found to be physically defective. That would drop as the diminished infant mortality rate made itself felt. But it was an appalling figure that nearly 50 per cent. of the children aged five were physically defective. We saw the expression of it in adult life during the war. It was all one continuous process, and this was where they had to begin.

#### A SYSTEM OF PREVENTIVE SERVICE.

The Minister said further that the Ministry had passed through the House measures affecting Nurses' Registration, &c., and they had now before them various other matters which had given the Department a lot of work, but were all part of the scheme to promote a system of preventive service, which it was essential to get—well paid nurses, for example—before they could expect to meet the needs of the masses of the people in this matter. That was why the Nurses' Registration Act, and the Dentists' Bill were essential ingredients in any health scheme.

## THE ST. MARYLEBONE INFIRMARY.

## PROBATIONERS AND PRIZES.

A large hall in this infirmary was filled to overflowing on June 14th to witness a very interesting ceremony. By the courtesy of the Guardians the representative of this Journal was one of the privileged guests. On the dais, which was gay with scarlet and green cloth, large vases of gladiolas, ox-eyed daisies and ferns, sat the Mayor who presided, the Mayoress, Mr. Frank Morris, J.P., Chairman of the Board, Miss Broadbent, Chairman of the Ladies' Visiting Committee, the Medical Superintendent, Dr. Hood, and many guests of honour. With charming courtesy, the Matron, Miss Cockrell, received her numerous guests. The main business of the meeting was preceded by an interesting and concise record, given by Miss Broadbent, of the work done during the strenuous years of the war by (a) the 220 who were on Active Service, and (b) the not less glorious work of those who "carried on" while very short-handed, in the Infirmary. The record included seven nurses who died during the terrible epidemic of influenzal pneumonia. Space will unfortunately not admit of giving details of work done, and the rewards gained, by those on Active Service. The Matron's share was large. She first served under the Territorial Force Nursing Service, as Matron of the Refugee Camp at the Alexandra Palace, later at the Maudsley Hospital for Neurasthenics, and finally she superintended the 54th General Hospital in France, when she passed through many exciting experiences.

The Infirmary was opened in 1881, by King Edward (then Prince of Wales). A few years later a training school was started under the guidance of Florence Nightingale. It has good reason to be proud of its history, its nurses and the excellent training given, as the following list of prize and certificate winners will prove.

## PRIZES.

1919.

*Medical Nursing*.—Maitland M. Sills, Prize; Daisy A. Shepherd, Certificate of Merit.

*Surgical Nursing*.—Maitland M. Sills, Prize; Doris Turner, Blanche Marlow, Certificate of Merit.

*Practical Nursing*.—Maitland M. Sills, Prize.

*Anatomy and Physiology*.—Maitland M. Sills, Prize; Blanche Marlow, Certificate of Merit.

*Bandaging*.—Catherine McLennon, Prize.

*For Essay on Economy as Applied to Medical Practice and Hospital Administration*.—T. J. Norman, Prize.

*The Best Collection of Charts*.—Doris Turner, Prize.

1920.

*Medical Nursing*.—Beatrice M. Smith, Prize; Phyllis M. Hunt, May A. Findlay, Dorothy G. Dowty, Louise T. N. Meldrum, Certificate of Merit.

*Surgical Nursing*.—Phyllis M. Hunt, Prize; Margaret Hardie, Dorothy G. Dowty, Louise

T. N. Meldrum, Helen E. T. Bailey, Norah Weekley, Violet Thornton, Beatrice M. South, Lilian Meehan, Certificate of Merit.

*Practical Nursing*.—Louise T. N. Meldrum, Prize; Norah Weekley, Beatrice M. Smith, Certificate of Merit.

*Anatomy and Physiology*.—Phyllis M. Hunt, Prize; Lilian Meehan, Certificate of Merit.

*Bandaging*.—Phyllis M. Hunt, Prize; Lilian Meehan, Certificate of Merit.

*Best Essay on Economy as Applied to Medical Practice and Hospital Administration*.—Violet L. Thornton, Prize.

*Best Collection of Charts*.—Lilian Meehan, Prize.

## GOLD MEDAL.

The Gold Medal was instituted by the Board in 1918, in recognition of the good work performed by the Nursing Staff, both past and present, in the Great War. It is awarded once a year to the best nurse in her final year of training. Three things are taken into consideration: ward work, general character, class and examination results. The first was awarded to Marion Duncan Walker, who died of influenzal pneumonia during the epidemic of 1918-1919. Her mother received it. Phyllis M. Hunt was the recipient for 1920.

The very interesting ceremony terminated by a cordial vote of thanks to the Mayor, proposed by Mr. Frank Morris, seconded by Mr. M. C. Walshe.

A generous and dainty tea was afterwards hospitably served to the guests in the garden.

B. K.

## PLEDGE MUST BE REDEEMED BY COLLEGE OF NURSING COMPANY.

We have received many letters from members of the College of Nursing, Ltd., who are astounded at the attitude adopted by its Council and Chairman in reference to their guinea Registration Fee. One and all, of course, repudiate any suggestion of mistake. The pledge given that automatically they were to be placed on the State Register without further fee—if they paid the College a guinea—was definitely made in print, and the suggestion that there was any ambiguity in the contract is indignantly repudiated. Moreover, many Sisters say that their Matrons urged them to join the College for *this benefit*, and that War Office-Matron officials used endless pressure in France to make them pay up also—and that "pressure under military law, especially with the 'serf clause' in force, was very difficult to resist." We can believe it.

It is not the money which members of the College appear to count so much as the breach of contract, and being treated as imbeciles—and this is the inference gathered from the Chairman's letter that "a certain number of the nurses who joined the College may possibly be under the impression that whatever Registration Bill became law, they would automatically

without further fee, be placed upon the State Register."

The pledge ran as follows:—"If, therefore, you are on the College Register, you will automatically and without further fee be placed upon the State Register when the Nurses Registration Bill is passed." There is no ambiguity about this statement. The people who originally gave this most indefensible pledge to induce nurses to join the College, and who are legally responsible, together with elected members of the College Council, that the thousands of guineas subscribed shall be forthcoming when required, are:—

The Hon. Sir Arthur Stanley, *Chairman*.

Miss A. B. Baillie, R.R.C., Matron, Royal Infirmary, Bristol.

Miss E. Barton, R.R.C., Matron, Chelsea Infirmary, S.W.

Mr. Comyns Berkeley, M.C., M.D., F.R.C.P., *Hon. Treasurer*.

Col. Sir James Cantlie, K.B.E.

Miss R. Cox-Davies, R.R.C., Matron, Royal Free Hospital.

Miss A. C. Gibson, late Matron, The Infirmary, Birmingham.

Miss A. W. Gill, R.R.C., Lady Superintendent, Royal Infirmary, Edinburgh.

Professor Glaister, M.D., Glasgow University.

Miss L. V. Haughton, R.R.C., late Matron, Guy's Hospital.

Miss Amy Hughes, late General Superintendent, Q.V.J.I.

Miss A. McIntosh, R.R.C., Matron, St. Bartholomew's Hospital.

Miss J. Melrose, R.R.G., Matron, Royal Infirmary, Glasgow.

Mr. W. Minet, Governor, St. Thomas's Hospital.

Miss E. W. Mowat, Matron, Whitechapel Infirmary.

Miss E. M. Musson, R.R.C., Matron, General Hospital, Birmingham.

Sir Cooper Perry, M.D., F.R.C.P., *Hon. Secretary*.

Miss M. E. Ray, R.R.C., late Matron, King's College Hospital.

Miss M. E. Sparshott, R.R.C., Lady Superintendent, Royal Infirmary, Manchester.

Miss A. Lloyd Still, R.R.C., Matron, St. Thomas's Hospital.

Dame S. A. Swift, R.R.C., Matron-in-Chief Joint War Committee.

Dr. H. G. Turney, M.D., F.R.C.P.

Miss C. E. Vincent, R.R.C., Lady Superintendent, Royal Infirmary, Leicester.

Dr. Jane H. Walker.

Miss C. Seymour Yapp, Matron, Union Hospital, Ashton-under-Lyne.

We can quite believe that many of the Matrons did not realise their financial responsibility when they issued the tempting pamphlet which together with their personal persuasion, influenced many nurses to join the College; but now that it is pointed out to them, we advise them at once to

issue a truthful statement as an antidote to the ambiguous document sent round in their names, and to insist that the seventeen thousand guineas entrusted to their care by trusting nurses for their State Registration Fee, shall be set aside for that purpose. The audited Balance Sheet presented with the Fifth Annual Report of the College of Nursing, Ltd., shows that £42,508 5s. has been invested up to March, 1920, and that £5,793 8s. 8d. was expended on salaries, printing, and office expenses during the past year in England; £485 17s. 0½d. in Scotland; and £459 10s. 6d. in Ireland—making an expenditure of £6,638 16s. 2½d.—a huge sum in our opinion for any benefits the nurses have received in return—but proving the College has the cash to pay this just debt. Moreover the Chairman has announced that a further £30,000 is available.

This matter is now being very widely discussed not only in the hospital world, but by the public, and will develop into a very serious scandal unless the policy of evasion is at once discontinued and the debt honourably acknowledged. Mr. Comyns Berkeley, the Hon. Sir William Goschen and Dame Sidney Browne, as Joint Hon. Treasurers of the College Company, cannot afford to permit any further ambiguity concerning it. They must reassure the nurses that they are entitled to the payment of this fee, by right and not by courtesy, and that without delay.

## AT LAST!

"My dear Stanley" and "My dear Burnham," have, to speak figuratively, fallen upon one another's necks, through the medium of the *Daily Telegraph*, and mutually congratulated one another upon the closing up of the shilling campaign for the Nation's Nurses. We feel sure their joy is infinitesimal in comparison with the sense of relief experienced by the Nation's Nurses. The news seems too good to be true. To be able to take one's walks abroad without being met on every hoarding by a half naked woman embracing a wounded soldier upon one's behalf (the ferrule of our umbrella has chastised many of these shameless Delilahs!), to open the morning paper knowing that no longer will one find oneself held up as a wretched pauper, dependent upon the charity of patients, and service men—thankful for shilling doles—to be no longer used by second-rate actresses for advertising purposes, is indeed a relief.

It is announced that the public have subscribed close on £100,000 in response to the three years' charitable appeal in the name of the Nation's Nurses, and very naturally the Nation's Nurses want to know where it is, or what has been done with it? We call once more for the audited accounts and balance sheets of this War Charity's Appeal. We note that the *Daily Herald* is also asking the College of Nursing, Ltd., for definite information in this connection.

## LEGAL MATTERS.

### MENTAL NURSES' ASSOCIATION, LTD., v. DOWNIE.

A judgment of the highest importance to private nurses and private nursing associations and co-operations was delivered in the Divisional Court, King's Bench Division, High Court of Justice, on July 15th, by Mr. Justice A. T. Lawrence and Mr. Justice McCardie, when the Mental Nurses' Association, Ltd., 8, Hinde Street, Manchester Square, London, W., appealed against the decision of His Honour Judge Bray at the Bloomsbury County Court on April 26th, when the Association sued Miss Mary Downie in that Court for breach of agreement.

The breach complained of was that within a year of leaving the Mental Nurses' Association she returned to the service of a person to whom she was introduced by the company, contrary to Clause 4 of her agreement.

His Honour, Judge Bray gave judgment for the defendant, but this judgment has now been reversed in the High Courts.

#### THE JUDGMENT IN THE HIGH COURTS.

We regret space does not permit us to give the judgment *verbatim*. The principal points are as follows:—

MR. JUSTICE A. T. LAWRENCE: This is an appeal from His Honour Judge Bray in a case in which the Mental Nurses' Association sued Miss Mary Downie for breach of the contract that she had entered into with the Association on December 4th, 1918, and the action was brought on the footing of a breach of the 4th clause of that agreement, which is a clause restricting the nurse from returning to service, or, in fact, taking from the Association its own patients. It is a protective clause. It is for the protection of this Mental Nurses' Association, and it seems to me to be aimed at preventing the very thing that has been done in this very case.

I think the learned County Court Judge must have drawn a wrong inference or was told something which induced him to put a false construction upon Clause 4, and therefore the appeal ought to be allowed.

MR. JUSTICE MCCARDIE: I agree. . . . unless this protective clause existed it is obvious that Miss Downie might go from one patient to another and practically enable herself to lay the foundation of some competitive institution. It was to prevent that, I conceive, that Clause 4 was introduced. . . . I entertain no doubt whatever that by the word "service" in Clause 4, what was meant and understood by the parties, and expressed by them, was that she should not go back to a person to whom she had been introduced by the Association, and there perform acts of service to or attend upon the needs of that person to whom she had been so introduced. That clearly, I think, is the object of this Clause. . . . I entertain no doubt that there has been a breach of the Clause.

The appeal was allowed, with costs, both in the High Court and in the Court below.

The Mental Nurses' Association, Ltd., is to be congratulated on obtaining, for the first time, a decisive judgment, which will be quoted in future similar actions as that given in a leading case.

Probably all Associations supplying nurses to the public have suffered financial loss in their business connections from the dishonourable action of nurses, who, having been sent to a case by an Association, sever their connection with the Association and retain the case. Such conduct is specially reprehensible in connection with a co-operation of nurses, whose members build up a business for their mutual benefit. Those Associations which insert a protective clause in the agreement signed by their nurses have now the assurance that they will have a legal remedy against such dishonourable conduct.

### CHELSEA HOSPITALS NURSES' CLUB.

An interesting development has just been started amongst the nursing staffs of five of the Chelsea Hospitals under the name of the "Chelsea Hospitals Nurses' Club." Its activities are grouped under the following headings:—"Choral," "Musical and Dramatic," "Literary and Debating," "Needlework," and "Sports."

The hospitals at present uniting in the scheme are the Brompton, the Cancer, the Chelsea Hospital for Women, the Chelsea Infirmary, and the Victoria Hospital for Children, Tite Street. All the nursing staffs in these hospitals are eligible for membership and it is desired to point out that past as well as present members are welcome. All wishing to join are invited to write for particulars to the Matrons of their hospitals.

### THE WELSH NATIONAL MEMORIAL TO KING EDWARD VII.

The King and Queen gave much pleasure by their visit to Denbigh on July 16th, to open the North Wales sanatorium, which is a memorial to King Edward VII. Replying to an address of welcome the King said: "My dear father was deeply interested in this noble work, and the extension of it is a fitting tribute to his memory." At the Sanatorium, Major David Davies, President of the Welsh National Memorial Association, presented to their Majesties, amongst others, the Matron (Miss M. Davies), the medical staff, and architect of the institution, and the King accepted from the architect a gold key with which he unlocked the door of the building.

Later their Majesties proceeded to Talgarth to open the South Wales sanatorium on the following day, when the Matron (Miss E. L. Mount) was amongst those presented.

## APPOINTMENTS.

## SUPERVISOR OF INFANT WELFARE WORK.

**Inter-Allied Red Cross Unit to Roumania.**—Miss P. L. A. Comyn has been appointed Supervisor of the Infant Welfare Work of the Unit to Roumania, under the Inter-Allied Red Cross, and the Queen of Roumania. She was trained at the New Hospital for Women, and St. Bartholomew's Hospital, London, and holds the Certificate of the Incorporate Society of Trained Masseuses, Public Health Diploma, National Health Society, including Infant Welfare. She has held the post of Assistant Masseuse at St. Bartholomew's Hospital, and served during the war as Staff Nurse and Charge Sister at the 1st London General Hospital, and in Salonica and Italy; and for the last four months has been a Pupil Midwife at the Elizabeth Garrett Anderson Hospital, taking the examination of the Central Midwives' Board in August, before leaving to take up her new duties in Roumania.

## NIGHT SUPERINTENDENT.

**Queen's Hospital, Birmingham.**—Miss Adelaide M. Jeffrey has been appointed Night Superintendent. She was trained at the Western Infirmary, Glasgow, where she was Sister. She has also been Sister and Night Sister at the Military Hospital, Bethnal Green, London. Miss Jeffrey holds the Certificate of the Central Midwives' Board.

## HOME SISTER

**Kilmarnock Infirmary.**—Miss Livingston has been appointed Home Sister. She was trained at the Royal Infirmary, Derby, and at the General Lying-in-Hospital, London, and in hospital dietetics at Charing Cross Hospital. She has been Home Sister at the Brompton Hospital, Night Sister at the Hospital for Sick Children, Edinburgh, and Sister at the David Lewis Northern Hospital, Liverpool. She at present holds the position of Sister-Housekeeper at the Middlesex Hospital.

## SISTER.

**Fever Hospital, Halifax.**—Mrs. Emily Crosby has been appointed Sister. She was trained at the Warrington Union Infirmary, and has been Sister at the Whitecross Military Hospital, and at the Aitken Sanatorium, Nolecombe.

## QUEEN VICTORIA'S JUBILEE INSTITUTE.

## TRANSFERS AND APPOINTMENTS.

Miss Christina M. Grant is appointed to Warwickshire, N.A., as County Superintendent; Miss Emma Merriman to Worcester as Assistant Superintendent; Miss Mary A. Binns to Lancaster as Senior Nurse; Miss Emma Stevens Brown to Bridgwater; Miss Edith Garratt-Jones to Accrington as Senior Nurse; Miss Violet E. Hunt to Gloucester; Miss Violet A. Walker to Sheerness; Miss Amy P. Williams to Cannock Chase.

Sir Jesse Boot has made another addition to his list of princely benefactions to his native city by giving £50,000 to the Nottingham General Hospital.

Only a few days ago Sir Jesse announced his intention to give £50,000 in furtherance of the East Midlands University scheme, and two or three weeks back it was announced that the Trentside estate which he has just bought for £20,000 was to be laid out as a beautiful pleasure garden.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## KERNELS FROM CORRESPONDENCE.

**Male Nurse, Cert. Med. Psycho. Assoc.**—"I was pleased to note that the membership of the Registered Nurses' Parliamentary Council is open to male nurses. I think we can give a helpful shove on to nursing affairs. Our Union is now upwards of 17,000 strong, and many of us have votes. All we want is fair play—and you, madam, appear willing to play the game."

(We take this expression of opinion as a great compliment.—ED.).

**District Nurse, Midlands.**—"It is being proposed that I should be accompanied by V.A.D.'s, and instruct them in district nursing. Have I any right to refuse? It seems most unfair. I drudged through four years' hard hospital work, and then six months' district work before I was considered worth £30 a year! (now raised). If this plan is widely adopted by the V.A.D.s, of course they will be paid as they are in hospitals. I don't want to give up my work, but am thinking about it."

(We advise you to continue your very useful work, and give your reasons for objecting to cover V.A.D.'s.—ED.).

**College Member.**—"Every nurse should claim her guinea from the College for State Registration to prove her strong disapproval of the contemptuous disregard of her intelligence by its officials and Council. It's not the money I mind but the insult. I thought companies were compelled to be careful over financial affairs. Apparently not where women are concerned."

**East Anglian Nurse.**—"Our Committee paid our guinea fee to the College. Surely it stands for State Registration. Of course they will not pay again."

(Committees have no right to use charitable funds for any such purpose. If you did not pay the guinea yourself, we do not see how you can claim it, but we presume your committee will do so upon your behalf.—ED.).

## NOTICE.

To "A Lover of Righteousness."—Name and address must be enclosed, not necessarily for publication.

## OUR PRIZE COMPETITION.

## QUESTIONS.

July 31st.—What are some of the reasons for the shortage of nurses to-day?

August 7th.—What is Vincent's Angina, or "Trench Mouth," and how is it treated?

# The Midwife.

## PRACTISING MIDWIVES.

The suggestion that women shall be compelled to undertake to practice midwifery for a definite period as a condition of receiving the certificate of the Central Midwives Board would, if carried into effect, be most unfair, and in the case of a profession of men would not be tolerated for one moment. Imagine the result if the General Medical Council issued a ukase that no medical student would be registered by that Council until he had put in an extra year of midwifery work after he had had the required number of cases and passed the required examination. After the manner of medical students the Houses of Parliament would be bombarded, and the reigning President of the G.M.C. would, in all probability, be burnt in effigy in Trafalgar Square.

District midwifery is unpopular for two reasons. (1) It is usually associated with patronage from lay persons which the best qualified and most self-respecting women resent, and (2) it is run on the cheap, the salaries offered in the past, in relation to the responsibility and strenuousness of the work have been, as a rule, disgracefully inadequate.

If midwives are to be required to practice as such then posts must be guaranteed to them at adequate salaries under professional supervision. To attempt to drive them into a branch of work in which the conditions of service are unpopular, and the pay below the poverty line, as a condition of obtaining a certificate which they prize, would be indefensible. The empty ranks of district midwives can never be satisfactorily filled by this method.

There is, however, a method which merits the serious consideration of the Minister of Health in his considered policy of consolidating the various health services and giving them a common direction and a common purpose instead of simply blindly increasing them.

There are many trained nurses who desire to qualify as certified midwives, but are not able to afford the required fees. At the instance of the Ministry of Health the Board of Education are giving grants to women to train as midwives. If it were provided that preference were given to trained nurses in awarding these grants, and that a condition of receiving them was an undertaking to practice midwifery for a definite period, the benefit would be threefold.

1. The grant need not be so large as that given to an untrained woman, because to conform to the Midwives' Act three months' training suffices for a nurse holding a certificate from a general hospital of not less than 100 beds, whereas it is six months in the case of a woman without previous training.

2. The standard of the nurse when trained would be higher and, therefore, the quality of her

work would be higher than that of the woman who only specialises for six months, and is apt to drift back to unscientific methods after leaving her midwifery training school.

3. The trained nurse who is also a certified midwife would be competent to give nursing care, as well as to act as a midwife in rural areas, and would thus be a much more valuable unit than the one whose knowledge is limited to the practice of midwifery.

## CENTRAL MIDWIVES BOARD.

### PENAL CASES.

A Special Meeting of the Central Midwives Board was held at Queen Anne's Gate Buildings, Westminster, on June 23rd, for the hearing of charges alleged against eight certified midwives with the following results:—

*Struck off the Roll and Certificates Cancelled.*—Midwives Harriet Boddice (No. 2605), Dinah Fairbrother (No. 18439), Annie Taylor (No. 16932).

*Sentence Postponed* (report of the Local Supervising Authority to be asked for in three and six months' time).—Midwives Ellen Marshall (No. 20,242), Lilian Emily Teagle (No. 12291).

*Cautioned.*—Midwife Betsy Richardson (report of L.S.A. in three and six months' time).

Of the other cases one was adjourned, and in one no action was taken.

## GUARDIANSHIP OF INFANTS BILL, 1920.

This Bill, "To amend the Law relating to the Guardianship and Custody of Infants," presented in the House of Commons by Colonel Greig, M.P. proposes that the mother is made joint guardian with the father, and has equal authority, rights, and responsibility with regard to the child in every case.

## THE MIDWIVES' ACT COMMITTEE, L.C.C.

The Midwives Act Committee of the London County Council have nominated Mr. H. de R. Walker, a member of the Committee to fill the vacancy consequent upon the resignation of Her Grace the Duchess of Marlborough.

## REGISTRATION OF MIDWIVES IN BHOPAL.

It is interesting to know that under the enlightened rule of the Begum of Bhopal, the registration of midwives is in force in that State, and further that if any woman acts as a midwife without holding the necessary certificate she is fined. The Begum, or Nawab, of Bhopal, is one of the native rulers in India, who, within the boundaries of her own State is entitled to a salute of 21 guns.



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## EDITORIAL.

### THE HOLIDAYS.

Once again the majority of our readers are thinking, after a year's strenuous work, of the holidays they have so well earned, and, whether the amount they can afford to spend is large or small—and for most nurses the possibilities are limited by a modestly lined purse—they will be wise to make the very most of their opportunities.

The primary object of a holiday to nurses is recuperation for future work, and for this enjoyment is a necessary ingredient, and is found in diverse ways. For one person the gaiety of Blackpool, or Brighton, or Ostend, constitutes enjoyment. Another desires quiet and solitude, and finds refreshment in a remote seaside place, on the moors, or in the beauties of Scotland, Wales, or Lakeland. The majesty of mountains, and their loveliness of form and colour, the ever-varying charm of rivers and lakes, the restfulness to mind and body as the boat wends its way, revealing new beauty at each turn, as the colouring of sky and land is faithfully reflected in the clear water, are an unending delight. The pleasures of such a holiday are manifold. In the rush of work we look forward to the time when the everlasting hills shall once again enfold us in their peace, and the mere remembrance seems to sustain, comfort and strengthen us. Then there is the actual enjoyment amounting to exultation when once again our feet tread the familiar spots. We revel in the long days amid the glories of lake and mountain, and enjoy the good North Country fare, and hospitable welcome, at little wayside inns, the quiet journey home in the evening sunlight, the limpid air caressing,

yet bracing, us with its soft touch. They are golden days, and their memory stays with us when we return to the duties of life.

For those whose duties lie normally in the country, rest and recreation may mean a visit to some busy centre. London, with its manifold absorbing interests, is a lode star to many, and a holiday spent there passes all too quickly. Again, there are the Universities, which offer, in surroundings of great charm, courses of lectures in the vacation, so that minds may be informed, and become more alert, as the beauties of the great literature of this and other countries are explained. Those who elect to spend their holiday in this way will return to their work refreshed and stimulated, taking with them food for thought and probably, also, a supply of books, those best and dearest companions for the quiet hours in the country, when the day's work is done, and which admit us to the company, and give us an insight into the minds, of the great of the earth.

It is also an enjoyment and relaxation to most people to see things of interest to them in their own work, and many nurses during their holidays take pleasure in collecting information concerning it, visiting institutions, acquainting themselves with new movements, and by these means keeping themselves abreast of modern methods.

During the last six years the delight of foreign travel has been denied us, but now, for those who are not deterred by the preliminary trouble of obtaining passports, there is no change so complete, and probably no enjoyment so keen, as that obtained by visiting foreign countries.

However our readers elect to spend their holidays, we wish them happiness, refreshment and invigoration as the result.

## OUR PRIZE COMPETITION.

STATE WHAT YOU KNOW OF URÆMIA. TO WHAT ARE THE SYMPTOMS DUE? WHAT ARE THE ESSENTIAL POINTS IN THE MANAGEMENT?

We have pleasure in awarding the prize this week to Miss J. Pepper, 3, Nidenwald Road, Sydenham, S.E. 26.

### PRIZE PAPER.

The cause of uræmia is the retention in the blood and tissues of some of the toxic excrementitious matters that ought, either themselves or in some changed form, to be excreted by the kidneys.

Analyses of the blood in uræmia have not generally shown a large proportion of urea; but it is found in the gastric and intestinal secretions, in the dropsical fluid under the skin, and it has been secreted by the sweat glands on to the surface of the skin, actually forming crystals, which give the skin the appearance of having been dusted with flour or pounded sugar.

The most striking symptoms are the uræmic convulsions, or uræmic eclampsia. These have a close resemblance to the ordinary attack of epilepsy. There is often a short tonic stage, and then general clonic convulsions of all the muscles of the limbs, face, eyes and trunk. The face becomes livid, there is frothing at the mouth, the saliva may be tinged with blood, and the pupils are dilated. After some minutes the convulsions subside, and the patient lapses into a state of coma, from which he may again pass into convulsions; and these are repeated again and again, with intervals of complete coma. During the convulsion the respiration is hurried, and the pulse is small and quick; the temperature is variable, and it may reach 104° F., or higher. Thus convulsion and coma succeed one another; but either may occur separately. Sometimes coma comes on quickly; or more slowly, drowsiness gradually increasing to stupor, and complete unconsciousness in a few hours. A temporary paralysis is sometimes observed.

The patient's tongue should be protected during the convulsions by placing something between the teeth.

It is also after convulsions that blindness (uræmic amaurosis) gradually occurs—it rarely precedes the fits, or happens without them. It may last from one to three days, and frequently passes off entirely. Deafness may also be noticed.

The chronic symptoms are headache, twitching of the muscles without loss of consciousness, recurrent attacks of dyspnoea, anxiety

and restlessness, or somnolence and stupor, itching of the skin, vomiting and diarrhoea.

Coma is usually treated by purgation, and pilocarpin is often ordered. Vomiting will require effervescent mixtures. The convulsions are usually controlled by whiffs of chloroform.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Henrietta Ballard, Miss M. Jameson, Miss P. Thompson, Miss N. Matthews, Miss F. Jackson, Miss Alice M. Burns.

### QUESTION FOR NEXT WEEK.

What are some of the reasons for the shortage of nurses to-day?

## MEDICAL MATTERS.

### THE DESTRUCTION OF THE MALARIAL MOSQUITO.

The brilliant results of the work of scientists, notably the late Sir Patrick Manson, in identifying the anopheles mosquito as the carrier and transmitter of the poison of malaria are well known. The larvae of this species of mosquito feeds on the surface of the water, automatically drawing into the mouth floating particles by producing microscopic whirlpools by the aid of a special organ. The method chiefly employed for the destruction of the anopheles mosquito has been by using oil, which floats on the surface of the water, and so suffocates the mosquitoes.

The habit of the anopheles in feeding has led M. Roubaud, of the Pasteur Institute, Paris, to study the efficacy of powdered formaline (Troixmethylene) as a destructive agent, and he finds that, sprinkled on the surface of the water they inhabit (one part powdered formaline to ten parts of fine sand) it forms an imperceptible deposit, and is swallowed by the larvae, which, being so minute, are poisoned by the small quantity of formol given off by the powder, while cattle and fish are unharmed. The quantity used is 25 to 50 powdered centigrams to a square metre of water.

M. Roubaud is now working at a method for the destruction of the larvae of the ordinary mosquito, and hopes soon to make an announcement on the subject.

### THE ALFRED JONES RESEARCH LABORATORIES.

New Research Laboratories, named after the late Sir Alfred Jones, who, during his life took so great an interest in the pioneer work done at Liverpool in the investigation of tropical diseases, have been opened in that city. Sir Alfred made provision in his will for

the erection of a laboratory. The Liverpool School of Tropical Medicine is now investigating yellow fever at Manaos, and is also carrying on research work in Sierra Leone, where it has obtained from the Colonial Office the long lease for the site of another laboratory.

£100,000 is required for the expansion of the school, and the Chairman, Sir Francis Davison, has given a donation of £1,000 in memory of his son, who fell in the war.

#### X-RAYS AND CANCER.

The medical correspondent of the *Times* reports that at the International Surgical Congress at Paris on the 22nd inst., the subject of discussion was the treatment of tumours, cancerous and otherwise, by X-Rays and radium.

It was pointed out that four kinds of re-action take place in living tissue as a result of radiation: (1) massive destruction, (2) stoppage of growth, (3) stimulation of growth, (4), modification of growth.

The discussion showed that the X-Ray treatment of tumours is always a local one, and the consensus of opinion was that it is no substitute for operation. Operable cases should always be operated upon.

#### HOPE FOR LEPERS.

Major-General Hugh S. Cumming has made a communication to the United States Public Health Service as to the hopeful results of the treatment of lepers by "ethyl ester," the active constituent of chaulmoogra oil. Following a course of treatment by the new method extending over a year, 48 lepers were paroled in October last by a special parole board, not officers of the Public Health Service, and up to the present they have remained free from the disease. It is indeed good news that there is hope for sufferers from this dreaded disease.

#### LUNG MOTORS.

Dr. Waldo, the Southwark Coroner, recently referred in the Coroner's Court to a "lung motor" which is to be found in every hospital in New York and Chicago, and suggested that it should be carried in all L.C.C. ambulances. By its means, when artificial respiration has been tried unsuccessfully, a mask is put over the mouth and nostrils, and the passage to the stomach plugged. Oxygen is then forced into the lungs by means of a piston.

Recent years have brought to light many methods of treatment formerly unknown, and which by a former generation would have been regarded as impracticable.

### NURSING ECHOES.

The Council of the Nightingale Fund have awarded Nightingale Scholarships to Miss Olive Haggalay, Miss Margery Cave, and Miss Katherine Thornton Down in the Household and Social Science Department of King's College Hospital for Women, 1920-1921.

A Conference of representatives of Associations affiliated to Queen Victoria's Jubilee Institute in England and Wales was held on July 20th, at Denison House, Westminster.

The Annual Report of the Ranyard Nurses is always of interest, as that of a pioneer society for nursing the sick poor in their homes, which has maintained a high standard of professional work, and also endeavours, through nurses working from a sense of Christian vocation, to use their influence to uplift the lives of the people amongst whom they live.

The Report for 1919 begins by referring to the death of Mrs. Selfe Leonard, who took over the leadership of the Mission on Mrs. Ranyard's death in 1879, and set to work to bring the training and policy of the Mission—especially of the Nursing Branch—into line with all modern developments.

There is a very appreciative reference to the work of Miss Harriet Barton, who had acted as Central Sister, and had been on the Sisters' Staff for twenty-five years. We read: "Nothing but ill-health would have taken her from us, and we miss her greatly. Her deep interest in all that concerned the health and well-being of the poor was an inspiration to all, and her gentle influence earned for her the love that outlives such a parting, and makes us feel her spirit still amongst us."

The whole staff, about eighty-five nurses and ninety Mission Workers, meet at Ranyard House on the last Friday in each month, and it is then that the workers who live in their districts in various parts of the Metropolis specially realise the help of being members of an army of nearly 200.

The financial aspect looms large, as the year closed with a deficit of £2,800 on the Nurse Fund, due largely to the very necessary increase in the salaries during the year. In one or two of the districts where the local Association is organised on the provident system the total cost is raised locally. In other districts papers are left by the nurses with their patients asking for contributions. This, the Report points out cuts across the former policy of free nursing, but circumstances have so altered that

from every point of view it is better for the people to contribute according to their means.

The care of the sick poor in many workhouse infirmaries reaches a very high standard, and brings relief and comfort to thousands. There is no section on whom the loving care they receive is better bestowed than on the small children, and the brightness, cleanliness, and order of a well kept children's ward results in the saving of many lives. The accompanying picture of Sister Combs, Sister of the Children's Ward at the Chelsea Infirmary, will show why the babies flourish, and regain their health in her skilled and tender hands.

An interesting correspondence on "Reconstruction in the Nursing Profession" is proceeding in *Time and Tide*, opened by Miss Jessie Holmes. Miss Gladys M. E. Leigh says, in advocating shorter hours of work: "You cannot exploit one section of the community for the benefit of another. . . . We hear continually of the wonderful work accomplished in our hospitals as the result of our voluntary system, but when we ask what has been done for the women who by their service made this system possible, we are told that broken in health, exhausted by interminable hours, starved by existing economic conditions, they are cast aside, a burden to the tax-payer or a charge to the charity of a relative, once their working-life is done.

"Is it fair, is it just, is it even decent, that the women who were the veritable pioneers of the feminist movement, who broke down the prejudice of the Victorian era, who made

possible for the professional women of to-day their wide heritage, their liberty and their freedom, should receive so grievous a recompense from the hands of their country?"

Miss Rimmer, National Union of Trained Nurses, writes:—"Nurses are charged, rightly or wrongly, with many sins, but, for the honour of the nurses, it is only fair to state that the charge of neglecting a patient in essentials is seldom one. I do not for one moment fear that a 48-hour week will inconvenience the patient or lessen the chances of recovery: it is the relations, friends and the servants who may be inconvenienced."

Miss F. A. Sheldon, of Guy's Hospital Trained Nurses' Institution, agrees with Miss Holmes that: "Personality and vitality play a tremendous part in a nurse's equipment, and this is immensely true of the private nurse, for she is practically isolated with her patient, and must be the perennial source of strength and sympathy. Her hours on duty are far too long, and the strain ages a woman before her time. Wise legislation would greatly benefit this branch of the profession."



HOW THE BABIES ARE CARED FOR  
AT CHELSEA INFIRMARY.

have been made that irate parents, if annoyed, rush off and use abusive language to teachers on L.C.C. school premises, upset the work, and it is suggested that such conduct should be made a punishable offence.

These scenes are usually the result of the cleansing order. Children from certain homes come with dirty heads. Mothers are remonstrated with by the School Nurse. Hence these tears!

It is wrong that clean children should run

#### Complaints.

the risk of infection, but mothers are very human, and the invariable rule should be that a letter should be sent by the nurse—never a post card. This, we regret to learn, has been done. The poor are very sensitive to publicity and ridicule, if more or less inured to dirt.

We believe absolutely in self-help in character building, and feel sure professional begging spells professional beggary sooner or later. We have watched with great interest Miss Albinia Brodrick's valiant co-operative movement away in the County Kerry. It has been an uphill fight (in which the elements have played a sportive part), but we are glad to learn that the hospital and co-operative stores at Ballincoona have had a fairly good year on the whole. Miss Brodrick writes:—

"This past year's good fortune has, on the whole, outweighed ill fortune. True, our apple trees are gone, our cows, for want of being able to get food, gave barely two-thirds of their proper milk, and a furious gale early in 1920 carried away 400 slates and some ridge tiles from our roof breaking three skylights on their way to earth.

On the other hand, our potatoes and vegetables never gave a better crop. We are well provisioned in jam to outlast the shortage of sugar, and a generous friend sent us a supply of dried peas and beans, which have proved invaluable.

Our kitchen has again seen domestic economy classes, and classes and meetings of various kinds went on during the winter.

Our dear people have put me on the Kerry County Council. I hope that it may be possible to do good work for them there.

The Co-operative Store goes ahead famously. Motor lorries are overcoming the transport difficulties, which looked insuperable at one time, and developments are on foot.

We have now a small library for our Gaelic League members."

We know with what frugality Miss Brodrick adjusts her personal needs, where her fine work is concerned, and when last in Ireland we heard an amusing story in this connection. The Hon. Albinia deigns to dine in the houseplace with her little maid, on potatoes (and Irish potatoes hot from the pot are food for the gods). It was thus, on this humble fare, that a very important clerical big-wig was entertained when he paid a chance visit to Ballincoona, and, low be it spoken, to the surprise of his hostess, this clerical dignitary (to say nothing of his inner man) was greatly perturbed. We can imagine the scene, and the smiling and brilliant sally with which this daughter of Erin would bring home to the father in God the beauty and duty of abstinence!

## WHAT I DID TO OVERCOME THE HABIT OF WORRYING.

By ETHEL WEBB.

I suddenly realised that I had formed the habit of worrying, and I found each day I was picking up more and more to worry about until my burden was fast spoiling not only my health and life, but also the lives of others more or less intimately associated with me. I was honest enough with myself to confess that it was an unwise and ungenerous test of affection to compel my family to put up with my moods, if my cares were more or less imaginary.

I sat down with a pad and pencil and set down in black and white the things that I was worrying most about, and it proved to be a long list. Then I sorted that list and put into one group my daily anxieties; in another group, the things I was afraid might happen. I discovered the keynote to all my trouble was fear, and no matter what happened, reality was never as dreadful as my imagination and fears painted it.

I sealed the lists in two envelopes and put them away for one week, and set myself the task of forgetting my worries. I knew there must be happiness and contentment in the world and I resolved to find some. I would learn to forget all unpleasant things, for possibly my very attitude toward life was drawing these causes of unpleasantness to me; I would find out. At least I would not worry about what I could not help or hinder, and would let to-morrow's burdens wait until to-morrow.

At the end of a week I opened the envelope containing my daily worry list and found at least half the things I was bothering about had never happened; some of the things that did happen proved to be blessings; a part of the other things I had forgotten, and the rest had no power to hurt me. At the end of a year I opened the remaining envelope, but by that time I had learned to overcome my habit of worrying, for like most bad things it proved to be only a habit.

I wish to say that there is a lot of happiness in every human being if he will only give it a chance to come out. If necessary, scrub your memory every morning and start each day with a clean, white page. Don't fret over your mistakes, but learn to profit by them. Happiness must be cultivated, it is not acquired by chance or accident. If we can learn to forget all irritating things and smile, we shall not have a chance to worry.

Furthermore, worrying brings on all sorts of nervous troubles and in time will make the victim positively ill. It breeds unhappiness and discontent, and creates an atmosphere that is likely to poison one's whole life. Face life bravely, learn to smile.

"Learning to forget, and to overcome the habit of worrying," in ten lessons, would be one of the finest courses that men or women could take, and one of the most beneficial to one's health.—*American Journal of Nursing.*

## QUEEN'S NURSES.

The Council of the Queen Victoria's Jubilee Institute for Nurses met at 58, Victoria Street, on Wednesday, July 21. In the absence of Sir Harold Boulton, Sir W. Cameron Gull presided.

A message was read from Her Majesty Queen Alexandra congratulating "the Council, and all those associated with them, upon the marked success of the great and far-reaching work which is being carried on by all of the many branches of the Institute."

A report was received from the Executive Committee showing most satisfactory progress. A large number of applications for affiliation have been received, but there is still a serious shortage of Queen's Nurses and particularly of those who are willing to practice midwifery.

It was reported that, at a Conference of representatives of the affiliated associations in England and Wales, held the previous day, a recommendation that the salaries and allowances of the Queen's Nurses should be substantially increased was enthusiastically received, and in future the minimum rates will be a clear commencing salary of £63, rising £3 annually to £75, with further increases according to the qualifications of the Nurses and the work undertaken. These are the minimum salaries, and Superintendents, Assistant Superintendents and Senior Nurses will be paid at correspondingly higher rates. The minimum allowance for board and personal laundry will be 25s. per week, while £10 per annum will be given for uniform. In addition to this, the Nurses must be provided with two furnished rooms with fire, light and attendance.

Every effort is being made to improve the conditions under which the Queen's Nurses work, and it is felt that if the scope and attractiveness of district nursing were more fully realised, many more nurses would be led to enter this branch of the profession.

The financial question is causing the Council great anxiety, and it is only with the help of several special contributions, including two legacies, that it will be possible to carry on the work to the end of this year.

We are glad to note that Queen's Nurses are at last beginning to be estimated at their true value, and receiving some of the consideration which is their due. These highly-trained Nurses are engaged in nursing in its truest sense, and are generally of the type which are singularly free from material instincts. All the more reason they should be treated with justice—if not with generosity. Whatever evolution the nursing of the community may take under our new dispensation—the Ministry of Health—the work of the Queen's Nurses will be found indispensable. They may be incorporated into a State Service, but their high standard of training and efficiency must be the ultimate standard of the people's nurses. If

midwifery is included in a nursing service, it must be of sound quality, and thoroughly well paid—not the ill paid day and night work which shatters the nervous system of the most robust.

## THE FUTURE PROVISION OF MEDICAL AND ALLIED SERVICES.

The Interim Report of the Council on Medical and Allied Services, and the First Report of the Welsh Consultative Council, presented to Parliament by command of His Majesty, are extremely interesting.

### REFERENCE.

The Reference to the English Council by the Minister of Health was:—"To consider and make recommendations as to the scheme or schemes requisite for the systematised provision of such forms of Medical and Allied Services as should, in the opinion of the Council, be available for the inhabitants of a given area."

The Welsh Reference is the same with the addition of the words "in Wales" after "systematised provision."

It is noteworthy that while the English Council consists of twenty members, and includes no nurse or midwife, although nursing and midwifery are dealt with in the Report, the Welsh Council has thirty members, and includes Miss Lena Crowther, Superintendent of the South Wales Nursing Association, and Mrs. Breeze, member, and Miss A. M. Davies, Hon. Secretary, of the North Wales Nursing Association.

### NEW AND EXTENDED ORGANISATION RECOMMENDED.

The English Council report to the Minister of Health that the organisation of medicine has become insufficient, that the general availability of medical services can only be effected by new and extended organisation, distributed according to the needs of the community, and that this organisation is needed on grounds of efficiency and cost, and is necessary alike in the interest of the public and of the medical profession; further, that any scheme of services must be available for all classes of the community, though in using the word "available" they do not mean that the services are to be free.

The Council classifies the services in the scheme which it outlines as those which are Domiciliary as distinct from those which are Institutional, and those which are Individual as distinct from those which are Communal.

It states that Domiciliary Nursing is an essential part of a Health Service, and that "this need, so strongly felt, has led to a variety of earnest efforts to meet it by various voluntary nursing associations. These associations are mainly supported by voluntary subscriptions, by fees, and by contributions from public authorities and societies. Concentration of effort is aimed at by the affiliation of district associations to County



Nursing Associations, some of which in their turn are affiliated to Queen Victoria's Jubilee Institute for Nurses. These associations, however, cannot fully meet the need.

The Council express the opinion that nursing should be available for all illnesses, and all persons, when the doctor deems it necessary, and states that, with the approval of the Minister of Health, they propose to refer the further consideration of the Nursing and Midwifery Services under their Reference, to a special committee for more detailed consideration.

The Welsh Council have attempted to prepare estimates of what should be regarded as an adequate number of Medical Practitioners, Nurses, Health Visitors, and other persons engaged in the health services of the community, and to express views as to the respective duties, and as to their relations to one another in a properly co-ordinated organisation. In a further Report the Council hope to make recommendations as to the qualifications and training of the several persons engaged in medical and allied services, and to deal with the financial aspects of their recommendations. They recommend that one full time qualified Midwife should be available for every 100 births per annum in thickly populated centres; one for every 80 births per annum in small towns; and one for every 40 to 60 births in rural parts.

Also, that an adequate service of Registered Nurses, always acting under the instructions of the doctor, should be available for attendance upon the sick, and that apart from the nurses actually required, at any given time in the Institutions there should be one outdoor nurse for every 3,000 of the population.

#### MOTOR TRANSPORT.

The Council expresses the opinion that the whole scheme for Health Visitors, Home Helps, Midwives, Registered Nurses, Doctors, Dentists and Institutions will be dependent for its efficient administration upon a large systematic motor Transport Service. Such a Service would go some way to putting a patient in a rural district in no worse a position than a patient in an urban district.

#### TELEPHONE FACILITIES.

It is considered advisable in the interests of the health of the people in rural areas that telephone facilities should be greatly increased. Whilst motor cars have done a great deal to annihilate distance for the Practitioner, it is at present impossible for people living in a remote part of the country to get into touch with the Doctor rapidly enough when his services are urgently and suddenly required, *e.g.*, in cases of precipitate labour.

Wherever a Health Visitor, Home Help, or Registered Nurse is domiciled it is important that she should be in telephonic communication with the Doctors and the Institutions in the area, and also with those responsible for the provision of Motor Transport.

## NATIONAL UNION OF TRAINED NURSES.

The Report for 1919-1920 of the National Union of Trained Nurses, lately issued, is a record of a great amount of work done during the past year, and contains much information useful to nurses. It shows that in the battle for State Registration of Nurses the Union played a honourable part, and helped materially to secure the final victory. It records the appointment of Miss Helen Pearse as President of the Union, in succession to Miss M. Heather-Bigg, and of Miss Farrant, as Hon-Secretary.

We note also that Miss Violetta Thurstan, M.M., member and late Secretary of the Union, has been placed by the Egyptian Government in charge of the Beduin Industries Refugee Camp at Behig in the Western Desert Province. There are about 500 Arab women and their belongings who live in tents, and weave beautiful carpets and other similar articles.

The Union is represented on a number of other societies thus keeping in touch with nurses' societies having similar interests, as well as with the National Council of Women, and the Professional Workers' Federation.

The Scattered Members' Branch is, we read, the most disinterested section of the Union. The material benefits its members derive are small, though many avail themselves of the Employment Centre, and when in town are always welcomed at the headquarters, and invited to any meetings of the London Branch, and it is hoped they will make good use of the bedrooms. The Report states that their financial help, and, even more, the consciousness that these loyal people, scattered through the United Kingdom and abroad, are backing the democratic principles for which the Union stands are of great service to it, and strengthen its numerous activities on behalf of the profession.

## NURSES AND PEACE.

Nurses who are anxious to forward the ends of Peace are invited to join the League of Nations Pageant on Hampstead Heath on Bank Holiday. The Demonstration is arranged to inform and interest the throngs of people who spend their holiday on the Heath. The Committee wants a big contingent of nurses. It asks them to:—

Come in uniform and follow the "War" Car.

Fall in at *No. 1 Post*, at 2.30 p.m. at the point where Corringham Road joins Hampstead Way. This is about four minutes' walk from Golder's Green Station, up Rotherwick Road.

For any further information write to W. H. Close, M.C., Major R.E., Honorary Secretary of the Committee, 41, Corringham Road, N.W. 4.

## THE COLLEGE OF NURSING AND THE STATE REGISTRATION FEE.

The following well-reasoned expression of opinion on the attitude assumed by the Council of the College of Nursing, Ltd., in connection with the registration fees it has taken from some 17,000 nurses appeared in the *Poor Law Officers' Journal* of July 23rd:—

### "THE FAIRER WAY."

"The College of Nursing is now apparently convinced of the unwisdom of mortgaging the uncertain prospects of the future. In June of 1916 a prospectus issued by the Council, asking nurses to enrol themselves on its voluntary register, stated that:—

'If you are on the College Register you will automatically and without further fee be placed upon the State Register when the Nurses' Registration Bill is passed.'

This seemed to assume that the Government and Parliament would adopt the Registration Bill framed by the College, or perhaps it should be said, the Bill that the College, with frequent alterations and amendments, endeavoured to prepare. The rejection of this complicated measure was, however, apparent from the first. It has ensured the fate also of the promise contained in the prospectus of 1916. Sir Arthur Stanley (Chairman of the College) has therefore incorporated in the third or July number of the College Bulletin a long letter addressed to the College members and marked 'important,' in which he refers to the attempts made by the College to draft a satisfactory Bill for the State Registration of Nurses and also to the other Bill prepared by the Central Committee for State Registration. But, as he says, 'The Bill which actually did become law was a third Bill introduced by Dr. Addison on behalf of the Government, and in it, no special provision was made for the registration of College members without further fee.' His letter proceeds to say that 'a certain number of nurses, however, when joining the College, may possibly have been under the impression that, whatever Registration Bill became law, they would automatically, without further fee, be placed on the State Register.'

### AN ERROR OF JUDGMENT.

"Under the impression" seems a rather mild phrase in view of the published statement that they would 'automatically and without further fee be placed on the State Register' if they came (by payment of a fee) on the College Register. This statement is amended a little by the next paragraph of the letter, which states:—'In the event of you yourself having joined the College before March 18th, 1920, with this belief, the Council is willing to pay such initial fee, not exceeding one guinea, as is payable under the rules of the General Nursing Council when your name has been entered upon the State Register, and upon a receipt of a letter from yourself to the

Secretary of the College stating that you joined the College on the definite understanding that your fee for registration would be paid.' But even this offer places upon the nurses who registered with the College an initiative which, as the original error was that of the College, or its Council, the College ought itself to undertake. The more effective course to follow would be to return the fee accompanied by a letter of regret that it had been accepted on the understanding that it would cover State Registration. The State Register with State Registration under the Act is the one valuable thing to nurses; it supplies the certificate that is of intrinsic worth; it embodies what was sought for by nurses for many years. The case of the immediate return to nurses of the fee paid to the College is apparent in the concluding paragraph of Sir Arthur Stanley's letter. It says:—'The Council are anxious in this matter to do everything that is fair.' As the College is precluded (to put it courteously) from 'automatically' placing its members on the State Register as promised, the Council should automatically put the members in the same position as they occupied before the fee was paid to the College. That would be not more than fair. Yet this final paragraph proceeds:—'The payment of these fees, if demanded by a large number of members, will entail a heavy financial loss to the College. As you are aware, the programme contemplated by the College goes far beyond State Registration, and for its fulfilment requires ample financial resources. The Council, therefore, earnestly hope that those members who can afford to pay the fee for their State Registration will not think it necessary to claim back that amount from the College, but will allow the fee that they have already paid to the College to remain in its funds, to help forward the movement for the improvement of the nurses' status and conditions of work, which, under the auspices of the College, has made such a satisfactory beginning, and which promises such important and far-reaching results.' This may all be true. But would it not have been much more applicable to the situation if such an intimation with regard to the needs of the College had been sent as a covering letter accompanying the return of a fee which had been obtained under, shall we say, a misapprehension? It is one thing to retain a sum so obtained and to plead that retention may be permitted; it is another thing to explain that an error has been made, to rectify it with regret and ask for further confidence. There can be no doubt with regard to which of these is the fairer way."

We hope the Poor Law Matrons on the College Council will take the earliest opportunity, if they have not already done so, to impress upon their fellow members that they cannot be associated with so misleading "a misapprehension" as retaining the guinea fee paid by the nurses for State Registration for the general purposes of the College. In our opinion "misapprehension" is a very merciful manner in which to describe this transaction.

## THE HOSPITAL WORLD.

There have been so many rumours about the sale of Westminster Hospital, and its amalgamation with other hospitals, that the report may or may not be true that it has been sold for £300,000, and is to be amalgamated with King's College Hospital as "The King's, Westminster." Anyway, we are glad to know that the pre-war scheme to transfer Westminster Hospital to Clapham is to be abandoned. The marvel is it was ever entertained; unfortunately, however, a site was bought from the late chairman, which, let us hope, will be disposed of without loss.

The garden fête at Chiswick House organised by the Ladies' Association of the West London Hospital, and opened on July 8th by Princess Arthur of Connaught, has proved a great success, a cheque for £1,100 having been handed to the hospital authorities.

To commemorate his seventieth birthday, Sir Jesse Boot has made another addition to his list of princely benefactions to his native city of Nottingham by giving £50,000 to the General Hospital, the money to be invested in Nottingham housing. The gift could not have come more opportunely, for, as everyone knows, the institution is sorely pressed for funds.

Thus within a month Nottingham has received gifts of the value of £350,000 from Sir Jesse Boot, the others being:—

A site purchased at £20,000 for a pleasure park with a crescent of houses, campanile and winter garden estimated to cost £250,000.

£50,000 for the Nottingham University College—£30,000 for the building fund, and £20,000 for the endowment of a chair for Chemistry.

The citizens of Nottingham will be justly proud in the knowledge that one of their number, a man born and bred in the city, and who has passed practically the whole of his life in their midst, should be inspired by such a splendid spirit of public service.

The Great Northern Central Hospital has decided to charge patients the following fees:—

General Wards.—A few shillings to 21s. a week, patients paying according to their means.

Cubicle Wards.—£1 1s. to £4 4s. weekly.

Private Wards.—£4 4s. to £6 6s.

Necessitous cases will be treated free. Small charges are to be made for dressings, medicine, and minor operations.

It is hoped by means of the new system to obtain from patients about £20,000.

**MACCALLUM & THE EDITOR, PRINTERS AND PUBLISHERS OF THE NURSING MIRROR AND HOSPITAL.**

As the Courts, which are crowded with cases, rise on Thursday this week, it is not probable that the above case will be taken until after the vacation.

## VALUE OF NURSING RECOGNISED.

Amongst the awards made to the London Hospitals at the special meeting of the Council of King Edward's Hospital Fund, convened to distribute the £250,000 entrusted to the Fund by the Joint Committee of the British Red Cross Society and the Order of St. John of Jerusalem for this purpose, the following affect nurses:—

Charing Cross Hospital, £1,250: Improvements to X-ray department, Nurses' Home, &c.

Croydon General Hospital, £1,000: Additional nurses' accommodation, subject to provisions of fire exit.

French Hospital, £2,000: Enlarged nurses and servants' quarters, and out-patient department, additional beds and other improvements.

Great Northern Central Hospital, £15,500: New Nurses' Home, new boilers and new kitchen.

Guy's Hospital, £11,000: Nurses' Home extension and special out-patient department.

Hendon Cottage Hospital, £600: New operating theatre, X-ray room, and improved nurses' accommodation.

London Temperance Hospital, £6,000: New nurses' accommodation, improvement in isolation ward, &c.

Middlesex Hospital, £2,700: New Night Nurses' Home.

Middlesex Hospital Cancer Charity, £300: New Night Nurses' Home.

Mildmay Mission Hospital, £2,500: Fire escape staircase, enlarged Nurses' Home, new operating theatre, and other improvements, on condition that the staircase is put in hand immediately.

Miller General Hospital for South East London, £15,000: Extension new Nurses' Home, kitchen and out-patient, casualty and pathological departments.

Nelson Hospital for South Wimbledon, £2,500: Extension, additional Nurses' rooms, &c.

Prince of Wales' General Hospital, £10,000: Extension, additional Nurses' rooms, &c.

Queen Mary's Hospital for the East End, £12,000: New Nurses' Home and in-patient operating theatre, subject to the submission of block plan for ultimate utilisation of complete site.

Royal Free Hospital, £8,500: Nurses' Home and extension in the order stated.

Royal National Orthopaedic Hospital, £24,000: Extension of out-patient department, X-ray, electrical, exercise and Swedish drill rooms, Nurses' bedrooms, &c.

St. Bartholomew's Hospital, £24,000: New Nurses' Home.

St. John's Hospital for Diseases of the Skin, £400: New Nurses' accommodation.

St. Mark's Hospital, £600: New Nurses' rooms.

St. Peter's Hospital for Stone, £600: New Nurses' rooms, X-ray rooms, &c.

St. Thomas' Hospital, £2,500: Enlargement of Nurses' dining-room.

West End Hospital for Nervous Diseases, £2,500: Removal to Regent's Park, improved Nurses' accommodation at Regent's Park, and reconstruction of out-patient department at Welbeck Street. Of the grant of £2,500, £500 is subject to the carrying out of a scheme for the provision of a new Nurses' Home at Regent's Park.

Wimbledon Hospital, £1,500: New Nurses' Home and resident medical officer's quarters.

The Editor thanks all the F.F.N.C. Sisters who have sent her their kind congratulations. She looks back on her association with them during the war as a very great privilege.

## APPOINTMENTS.

### LADY SUPERINTENDENT.

**Rotunda Hospital, Dublin.**—Miss Mitchell Bruce, A.R.R.C., has been appointed Lady Superintendent. She was trained at the Royal Infirmary, Aberdeen, and in midwifery at the Rotunda Hospital, in which institution she held the position of Sister. For five years she did war service as a member of Queen Alexandra's Imperial Military Nursing Service Reserve.

### MATRON.

**South London Hospital for Women and Children, South Side, Clapham Common.**—Miss K. E. Luard has been appointed Matron. She was trained at King's College Hospital, and has held the positions of Out-Patient Sister at the Evelina Hospital, Southwark, Night Superintendent at Charing Cross Hospital, Registrar of the National Union of Trained Nurses, and Matron of the Bucks and Berks Joint Sanatorium, Peppard Common, Oxon. As a member of Queen Alexandra's Imperial Military Nursing Service Reserve Miss Luard worked in France in hospitals of the British Expeditionary Force, was twice mentioned in Dispatches, and has received the Royal Red Cross with Bar.

**Royal Lancaster Infirmary, Lancaster.**—Miss K. G. Lloyd, R.R.C., has been appointed Matron. She was trained at the General Hospital, Birmingham, subsequently held the positions of Sister, and Assistant Matron at the same institution, and from the outbreak of war till July, 1919, she held the position of Matron of the 1st Southern General Hospital, Territorial Force Nursing Service.

### DISTRICT SISTER SUPERINTENDENT.

**Queen Charlotte's Lying-in-Hospital, London.**—Miss Florence Rodwell has been appointed District Sister Superintendent. She was trained at Lincoln County Hospital, and has held the positions of Training-Midwife, Maternity Nursing Association, and Matron, Maternity Home, Hull.

### NIGHT SISTER.

**Dorset Mental Hospital, Herrison, Dorchester.**—Miss Edith M. Yeedon has been appointed Night Sister. She was trained at Graylingwell Mental Hospital (5 years) and Royal Portsmouth Hospital (3 years), and has been Sister at the Kent and Canterbury Hospital, Ward and Night Sister at the County Hospital, Lincoln, Night Sister and Housekeeping Sister at the Royal Portsmouth Hospital. Miss Yeedon holds the Medico-Psychological Certificate.

### SISTER.

**Cameron Hospital, West Hartlepool.**—Miss E. Corfield has been appointed Sister. She was trained at the Guest Hospital, Dudley, and has held the position of Staff Nurse and Holiday Sister at the Royal Infirmary, Bradford.

Miss E. Carries has also been appointed Sister in the same institution. She was trained at the Royal Infirmary, Gloucester, where she held the position of Holiday Sister.

**New Maternity and Rest Home, Liverpool Maternity Hospital, Chatham Street, Liverpool.**—Miss R. E. Cross, A.R.R.C., has been appointed Sister. She was trained at the David Lewis Northern Hospital where she was afterwards Holiday Sister. She also held the position of Assistant Night Sister at the Guest Hospital, Dudley, District Sister in the Liverpool Maternity Hospital, and during the war, worked as a Sister of the Territorial Force Nursing Service at home and abroad, and was Sister-in-Charge of the Military Hospital, Rockferry. She has also worked in Liverpool as a Queen's Nurse.

**City Hospital, Grafton Street, Liverpool.**—Miss Laura Yaxley has been appointed Sister. She was trained

in infectious nursing in the same institution, and at the Mill Road Infirmary, Liverpool, and is at present Sister at Bethnal Green Infirmary, and has done Army Nursing.

We are asked by Miss M. O. Abell, Head Masseuse at the Edmonton Military Hospital, to say that the appointment of Massage Sister at that institution, recently notified in our columns, referred presumably to "the infirmary part of the hospital" and not to the staff of masseuses appointed by the War Office.

We note this as requested, but must point out the advertisement for applications for the post stated that they were to be sent to the Matron of the Military Hospital, and that the official form returned to us, notified that the appointment was to that hospital.

## RESIGNATIONS.

Miss Frances E. Marquardt, Matron of St. Giles' Infirmary, Camberwell, after holding the position for 21 years, is retiring from active work in September—a very serious loss to the Nursing School attached to the Infirmary and to the nursing profession. Miss Marquardt has completed 35 years' service, 29 of which have been in Poor Law administrative positions, so that the best years of her life have been used for the nursing service of the country.

Miss Marquardt is a lady of great force of character, whose devotion to public duty and to the welfare of every member of the nursing staff under her supervision cannot be surpassed. She has for many years taken an active part as a member of the Society for the State Registration of Trained Nurses, and as a delegate on the Central Committee in promoting the organisation of trained nursing by the State, and we are glad to know that she still intends to continue her interest in the profession of which she is so honourable an example.

The Kingston Guardians have accepted the resignation of Miss Sinclair, the infirmary matron, who at the last meeting, was called on to resign owing to her unauthorised use of the infirmary's motor ambulance.

## HONOURS FOR NURSES.

### THE ROYAL RED CROSS.

The Duke of York held an Investiture on behalf of His Majesty, in the Quadrangle of Buckingham Palace, on July 20th, when the following ladies were decorated with the Royal Red Cross:—

#### BAR TO THE ROYAL RED CROSS.

*British Red Cross Society.*—Miss Maud Macdonnell.  
THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Flora Craig.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Alice Mrs. de Winton, Miss Christina Soutar and Miss Scott Newton.

*Voluntary Aid Detachment.*—Constance Mrs. Pigg.  
THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Daisy Martin.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Patricia Meaney, Miss Susan Bradshaw, Miss Agnes Campaigne, Miss Ellen Disney, Miss Dora Fraser, Miss Christina Henderson, Miss Kathleen McLean, Miss Alice Moxon, Miss Elinor Roberts and Miss Dinah Steele.

*Territorial Force Nursing Service.*—Miss Edith Denison, Miss Amelia Dobson and Miss Olive Greenwell.

*Civil Nursing Service.*—Miss Mary Whyte.

*British Red Cross Society.*—Myfanwy Lady Hoskins, Miss Agnes Ormiston and Miss Dorothy Philpott.

*Civil Hospital Reserve.*—Miss Bessie Reid.

*Voluntary Aid Detachment.*—Miss Ida Fyson, Miss Joan Husey, Miss Maud Kirk, Miss Jane Leresche, Nora Mrs. McLellan, Miss Millicent Norton and Miss Dorothy Ridley.

Queen Alexandra received at Marlborough House the members of the Military and Civil Nursing Services who have been awarded the Royal Red Cross, subsequent to the Investiture at Buckingham Palace.

Dame Maud McCarthy (Matron-in-Chief, Territorial Force Nursing Service), was also received by Her Majesty.

His Majesty conferred decorations as follows at Buckingham Palace, on Friday, July 23rd:—

#### BAR TO THE ROYAL RED CROSS.

Miss Ethel Denne, Queen Alexandra's Imperial Military Nursing Service, and Miss Mary Fisher, Voluntary Aid Detachment.

#### THE ROYAL RED CROSS (FIRST CLASS).

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Eva Mason, Miss Alice Rowe, and Miss Christine Sandbach.

*Queen Alexandra's Imperial Military Nursing Service (India).*—Miss Winifred Aldridge, Miss Phoebe Exshaw, and Miss Edith Marshall.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Ethel Beloe, Netta, Mrs. Dunlop, Miss Elsie Evans, Miss Mary Gregory, Miss Maud Hopton, Miss Winifred Hughes, Miss Emily Middlemist, Miss Hannah Henderson Smith, and Miss Edith Stanton.

*Territorial Force Nursing Service.*—Phoebe, Mrs. Balmforth, Miss Martha Reid-Morrison, and Miss Katherine Todd.

*Civil Nursing Service.*—Miss Lucy Ellis, Miss Lucy Garnet, and Miss Rachel Paterson.

*British Red Cross Society.*—Frances, Mrs. Stephens.

*Civil Hospital Reserve.*—Miss Maud Beverly, and Miss Jessie Robertson.

*Civil and War Hospitals.*—Miss Mary Tyndall.

#### THE ROYAL RED CROSS (SECOND CLASS).

*Queen Alexandra's Royal Naval Nursing Service.*—Miss Bertha Martin.

*Queen Alexandra's Imperial Military Nursing Service.*—Miss Dora Mason, Miss Margaret Riddell, and Miss Jean Todd.

*Queen Alexandra's Imperial Military Nursing Service Reserve.*—Miss Margaret Houston, Miss Jessie MacQueen, Miss Nina Maling, Miss Edith Marshall, Miss Christina McDonald McLennan, Miss Alice Rennison, and Miss Edith Smith.

*Territorial Force Nursing Service.*—Miss Nellie Hayes, Miss Hilda Purse, Miss Eliza Robertson, Miss Violet Rutter, and Miss Maud Stainton.

*Civil Nursing Service.*—Miss Annie Gardner, Miss Agnes Greenshields, Miss Mary Millar, and Miss Florence Whitley.

*British Red Cross Society.*—Miss Ethel Florence, Miss Hannah Gobbett, Miss Emma Jay, Amy, Mrs. Skinner, Miss Bessie Smith, and Miss Ellen Surman.

*Civil Hospital Reserve.*—Miss Elizabeth Riach.

*Civil and War Hospitals.*—Miss Olive Plummer.

*Voluntary Aid Detachment.*—Miss Gladys Bell, Miss Violet Collett, Miss Kate Firth, Ellen, Mrs. Hardiman, Miss Mary Harding, Miss Gertrude Morris, Mary, Mrs. Peat, Miss Winifred Spencer, Miss Mary Stout, Miss Mary Tracy, Miss Charlotte Walker, Miss Selina Watson, and Miss Eileen Webber.

*Uganda Nursing Service.*—Miss Ethel Pratt.

Queen Alexandra received at Marlborough House the Members of the Naval, Military and Civil Nursing Services who had been awarded the Royal Red Cross.

Miss A. B. Smith (Matron-in-Chief, Queen Alexandra's Imperial Military Nursing Service) was also received by Her Majesty.

## SKETOFAK.

### A NEW CULICIFUGE.

After exhaustive experiments with a wide range of materials, Burroughs Wellcome & Co. have issued the particular combination which proved itself to possess the most effective and persistent properties as a culicifuge under the title, "Sketofax" antiseptic cream.

Not only does "Sketofax" provide protection for those who visit mosquito-infected areas, but it will be most acceptable and undoubtedly most effectual as a protection against the stings of gnats and midges which are most troublesome to many who seek recreation on playing fields, rivers or allotments, etc. Patients going to the country might well be advised to pack a tube of "Sketofax" which not only affords protection against bites of insects, but is a very effective preparation for soothing the pain and reducing the inflammation after an attack.

"Sketofax" is supplied in portable, collapsible tubes, and is easy and convenient to apply, being smeared over exposed surfaces. It is a preparation which is evidently based upon careful research and experiment as may be inferred from its source.

## UNTRUE TALE WITH A MORAL.

### DAINTIES FOR THE SHELL-SHOCKED.

I met a worldly little friend in Bond Street recently. We chatted about the gay world, chiffons, old silver, antique porcelain, pictures, prints and what not, so temptingly displayed as we passed along. She appeared as self-centred as usual. Then we stopped at Cadbury's, and she ordered a whole floor full of dainties—*quality* no doubt, *also* prices! "I want the very best," she kept repeating, "chickens, larks, raised pies, Wiltshire bacon, hand-made butter, Stilton cheese."

Then she twinkled at me—"Ain't I a greedy little pig?"

"Well, in these hard times—" I began.

"Usual address, madam?" enquired the shopman.

"Same as usual," she replied, "care of the matron, Palace Green Hospital for Officers, Kensington."

Then I remembered the appeal in the press for gifts of dainties for shell-shocked officers, and expressed remorse.

"Now you shall lunch with me for your sins," said the little tyrant.

I did.

I was ready for my tea!

S. T.

## BOOK OF THE WEEK.

## "THE PEAK OF THE LOAD."\*

The two former books by Miss Mildred Aldrich, "The Hilltop on the Marne," and "The Edge of the War Zone," will make her many admirers eager to read her last volume relating her most interesting experiences in the war zone in France. It will be remembered by many that Miss Aldrich, an American lady, no longer young, a resident on the Hilltop on the Marne, elected to stay in the house which had been hers in time of peace, during the whole of the eventful years of the war.

This last volume covers the period from the entrance of the Stars and Stripes to the second victory on the Marne, and like its predecessors it takes the form of letters written to an intimate friend, vividly describing the stirring happenings of that time.

It is frankly enthusiastic as to the coming into the war of her compatriots.

"Personally, after the uplift the decision gave me, came a total collapse, and I had some pretty black days. I had to fight against the fear that we were too late, and the conviction that if we were really to do our part at the front, the war was still not to last one year, but years. But, no matter from what point of view one looks at the case, it does make a difference to think that our boys are coming over here to go into this holocaust."

The delightful characteristic of this lady is, that while she is heart and soul with the Allies, and unwearied in her efforts to do her share to alleviate in any way their sufferings, she is still able to take interest and to actively share in the intimately personal life of her little household, and she most delightfully details them to her friend, in conjunction with the tragedies that are happening close at her door.

"Lovely day—so good after the terrible winter. The flower garden will not be very good this year, I lost so many rose bushes in the awful long spell of cold. But what of that. Potatoes are the only *chic* thing this year. They are planted everywhere. The weather is good for planting, if it lasts I am going to try golden bantam corn. What do you think of that for a farmer? Hush! Louise does the hard work and I boss it. I sit in the field on a camp chair with the seeds in a basket and a green umbrella over my head and big gloves on my hands, while Louise grovels in the dirt and carries out my ideas. I get terribly tired and very red in the face, but Louise, brown as a berry, comes out as fresh as possible."

She is equally happy in her description of her animals. Amélie thinks it would solve the milk problem if they kept a goat. "I was amazed when she came back carrying the cunningest little beastie you ever saw."

"Why, Mélie," I cried "that won't give any milk!"

"Give it time," she replied, "It's such a pretty one."

So I named it Jeanette, and it came to live at the farm.

I was eternally catching it in my garden standing on its hind legs nibbling my rose bushes. But it was so fascinating on its stiff wooden peg-like legs, and it side-stepped so gracefully when I was catching it, and danced on its hind feet and butted at me sideways, that I could not get cross."

Miss Aldrich finishes this charming chapter with, "You can't call this a war letter, can you?"

She was able to gratify Mademoiselle Henriette's desire (who had served in the ambulance) to see a big modern war hospital. "She thought the American girls so handsome and smart," and they were, but most of all at tea in the huge white refectory she was impressed by the *cameraderie* between the men and women as they sat there over their tea." She goes on to tell her friend, "You will not see the pretty picture which we saw from the window of the Abbé's study, a white-robed, white-coifed nurse sitting on the pedestal of Sainte Genevieve, with her white-shod feet sticking straight out in front of her, and her young head bent over a writing pad, while the setting sun flecked the white figures with shadows from the moving leaves of the big trees about her. *Monsieur l'Abbe* remarked, 'She ought to be writing verses, but I presume she is only writing home.'"

There are many exciting and deeply interesting chapters on Gotha raids, and on the allied retreats, and the flight of refugees and of her own charming hospitality to "the boys."

The combined pathos and humour with which Miss Aldrich relates her dramatic experience should make its appeal to all readers. H. H.

## THE NURSES' BOOKSHELVES.

MESSRS. J. WRIGHT & SONS, LTD., Colston Avenue, Bristol, are the publishers of Lectures on Surgical Nursing, by E. Stanmore Bishop, F.R.C.S. Eng., and other professional literature.

## A WORD FOR THE WEEK.

Deep in the heart of the bird, the flower, the poet, the child, and the Virgin Mother, lies that mystic, fragile, fleeting thing called happiness. Perhaps after all it is only the power to sense the ideal, share the invisible, grasp the intangible, and build a new world from the same dream-dust God used when He fashioned this.—Edward Earle Purinton, "The Triumph of the Man Who Acts."

## WORK.

The comforter of sorrow and of care;  
The shortener of way prolonged and rude;  
The lightener of burden hard to bear;  
The best companion 'mid the solitude;  
The draught that soothes the mind and calms the brain;  
The miracle that lifts despair's thick murk,  
When other friends would solace bring in vain:  
Thank God for Work.

—E. Sabin.

\* By Mildred Aldrich. Constable & Co., London.



## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### KERNELS FROM CORRESPONDENCE. NURSING BY THE CLOCK.

*Miss Adelaide Murray.*—"To nurse on private duty 'by the clock' would at once destroy all chance of harmony between the private nurse and the patient. The nurse would have to keep a little book which, presumably, would be presented to employer daily. Imagine the following entry: 'Extra duty 7 to 9 p.m. at 1s. 0½d. an hour, 2s. 1d. Patient helpless, needed feeding at dinner, watching for hæmorrhage; medicine due 8 p.m.; patient very restless.' How could any mother, or husband, or wife feel real respect for a nurse, or a nurse for herself, when brought constantly into touch with the sordid details of selling one's work at such a price? During the war I have heard myself described by society women posing as nurses, as 'the hired nurse.' I fear no amount of registration would wipe away the feeling upon the part of a patient that the relations with the nurse were exceedingly material, when every minute of service beyond the 56 hours suggested had to be calculated and accounted for. A colleague in satire suggests in making out the bill, 'Giving bedpan, 6d.; bottle, 3d.; filling hot-water bottle, 2d.; using feeder, 1d.' I suppose if we do not 'nurse by the clock' after the Hours of Employment Bill is passed we shall be hauled up and punished for 'being found on the premises with intent to commit a felony!'"

### PROFESSIONAL ETHICS IN PRIVATE NURSING.

*Member Nurses' Co-op.*—"I was pleased to read of the judgment in the High Courts in the case of the Mental Nurses' Association *v.* Downie. It is only just. I belong to an association of Private Nurses worked on the Co-operative principle and I know dozens of cases where our business has been deprived of cases by members, who seem to have no qualms about resigning and remaining with patients supplied through our office. It appears to me most dishonourable and unprofessional, as it is the duty of every member to help support the Association for the benefit of fellow members as well as of herself. Now let us hope this selfish conduct will be stopped. There is another bad system in the private nursing world, in associations where professional ethics appear at a discount. The superintendent and nurses agree to charge a diversity of fees; so instead of having a printed schedule by which a patient knows what he will have to pay for various diseases, the nurse judges hastily from domestic appearances and advises what is to be charged. This, of course, opens the door to all sorts of extortion, and people are victimised."

[We agree with our correspondent that both methods are wrong, and as the former practice has of late become much more prevalent, no doubt co-operations of nurses will have to protect their business by adopting a clause, such as that on which the Mental Nurses' Association won the reversed judgment. It would be conducive to honest dealing also if private nurses' fees were standardised, as they are in Australia, New Zealand, and elsewhere, through their national associations, which meet from time to time and agree what the fee is to be. Australia has just raised private duty fees to £4 4s. a week, owing to the increased cost of living, but there is very little domestic service provided, which makes the nurses' work very arduous.—ED.]

### THE COLLEGE PLEDGE.

*Sister, Met. Asy. Board.*—"We feel we are being placed in a thoroughly false position by the College Council. What right has it to retain our State Registration Fee, unless we ask for it back again? Is this the sort of thing the General Nursing Council can deal with?"

[Not until the Rules are in force, but as the Disciplinary Body of the Nursing Profession it will no doubt in future establish a code of professional ethics.—ED.]

*Poor Law Sister.*—"I enclose you an admirable criticism of the College 'latest,' which appeared in this week's *Poor Law Officers' Journal*. Many nurses will not ask for their money back for fear of their future. The College Matrons ought to protest in a body—but perhaps they too are afraid of social influence. They appear to agree to anything."

### THE NURSE PAYS.

*Scottish Sister.*—"I fear after all we are to have a male Registrar for Scotland, although good trained women applied. How behind the times we are!"

[Indeed, yes, if there is not a woman to be found in Scotland to fill this well-paid post. We fear the nurses on the Council have not supported the demand with sufficient tenacity, or surely they could have carried the principle that clerical officials of a woman's professional council, paid by women, should be women. We await further information on the appointment of Registrar, both in Scotland and Ireland; if men are appointed it will be the nurses' own fault. If private pressure failed, then rousing public meetings should have been held, resolutions passed in support of a Nurse Registrar, and the Government department responsible for the appointment should have been invited to receive a deputation in support of the demand.—ED.]

### OUR PRIZE COMPETITION.

#### QUESTIONS.

*July 31st.*—What are some of the reasons for the shortage of nurses to-day?

*August 7th.*—What is Vincent's Angina, or "Trench Mouth," and how is it treated?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### MONTHLY MEETING.

The monthly meeting of the Central Midwives Board was held at the Board's Offices, 1, Queen Anne's Gate Buildings, Dartmouth Street, Westminster, on Thursday, July 22nd, Sir Francis Champneys in the Chair.

### APPLICATIONS.

*For Approval as Lecturer.*—The applications of the following medical practitioners were granted:—Andrew Lowry McCully, M.B.; Laura Gertrude Powell, M.D., D.P.H.

*For Approval as Teacher.*—The applications of the following midwives were also granted:—Midwives Ellen Beatrice Bullard (No. 8734), Maud Ethel Catherwood (No. 42047), Mary Birkett Franks (No. 43255), and Mary Hurwitz (No. 28356).

The Secretary reported the presentation by a candidate for examination of a certificate of birth which had been tampered with, and it was decided that the candidate be not admitted to examination before November, 1920.

Applications were considered from four women to be certified by the Board under Section 10 of the Midwives Act, 1918, by reason of holding the certificate of the Central Midwives Board for Ireland, obtained otherwise than by examination.

It was agreed that the training undergone, and the examinations passed, by the applicants being equivalent to the standard adopted by the Board, their names be entered on the Midwives' Roll, on the payment of the fee of one guinea.

*For Voluntary Removal.*—Applications from two midwives for the removal of their names from the Roll were granted, and the Secretary was directed to cancel their certificates.

### PENAL CASES.

A Special Meeting of the Central Midwives Board was held at 1, Queen Anne's Gate Buildings, Dartmouth Street, Westminster, on July 22nd, for the hearing of charges alleged against six midwives with the following results:—

*Struck off the Roll and Certificates Cancelled.*—Midwives Mary Ann Richardson (No. 9519) and Martha Fogg Wilde (No. 3641).

*Judgment Postponed.* (Report of Local Supervising Authority to be asked for in 3 and 6 months' time).—Midwives Jane Anne Leech (No. 14251), Ann Jane Parrett (No. 10264), Elisabeth Coulter (No. 38877).

*Cautioned.*—Midwife Mary Crookston Coulter (No. 48705).

## CENTRAL MIDWIVES BOARD FOR IRELAND.

The Central Midwives Board for Ireland held their first examination for Midwives on the 8th and 9th inst. The examination took place simultaneously at the Royal College of Surgeons, Dublin, the Queen's University, Belfast, and University College, Cork.

The undermentioned 62 candidates passed satisfactorily:—

*Belfast Maternity Hospital.*—H. S. Coulter, R. H. Dickson, M. Emerson, G. M. Fleming, G. H. M. Greenham, M. McPhillips, M. B. Salton, S. H. Smyth, M. J. Stewart, E. B. M. Thomas.

*Belfast Workhouse Infirmary.*—D. Drennar, C. Galbraith, J. M. Graham, M. M. Harkness, B. McClenaghnam, M. McKee.

*Belfast, Malone Place Refuge.*—E. A. Kyle.

*Coombe Hospital.*—H. F. Brennan, N. Creyne, T. Crumlisk, J. Frayne, M. Graham, A. Healion, G. M. Long, M. M. Macken, C. Makin, B. O'Brien, M. O'Driscoll, E. G. L. Rutter, A. Ryan, H. M. Ryle.

*Cork Lying-in Hospital.*—B. McCarthy, M. Mason, K. O'Sullivan, V. L. Robertson.

*Dublin, National Maternity Hospital.*—J. Arrol, E. C. Brannigan, L. M. Casserly, M. Clancy, B. Cooke, B. M. Doyle, A. J. Halligan, M. A. Hennessy, E. M. Regan, D. M. Valentine.

*Dublin, Rotunda Hospital.*—R. E. Alcock, A. E. Burns, T. Byrne, A. W. Cameron, B. H. C. Collett, L. Dodds, A. M. Dowling, F. Drewitt, E. M. Horan, E. Harris, M. Hayes, A. M. Mooney, N. Murray, M. C. Napper, M. E. Orr, M. M. Swift.

*Lurgan Workhouse Infirmary.*—M. A. Flanagan.

## LONGEVITY IN SOMERSET.

Dr. W. Edelstein Bracey (Wedmore, Somerset) writes in the *British Medical Journal*:—"It is somewhat refreshing in these days of hustle and strain to come across long-lived families. I was recently called to a confinement, and in the absence of a nurse my principal assistant was the great-grandmother, ably seconded by the grandmother, the mother having an excellent time in being delivered of a fine healthy boy. Within a few hours I was called to a similar case quite close to the first, this case going even one better, for the midwife in attendance proved to be the baby's great aunt, and was assisted by the grandmother, the great-great-grandfather being packed off to bed out of the way, while the husband and grandfather were despatched by the great aunt to fetch me! It is a matter of some regret to me that the absence in America of the great-grandmother broke the sequence of generations under a single roof that would otherwise have constituted, I fancy, very nearly a record."

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## EDITORIAL.

### THE NEW ERA.

The whole world is in the crucible; this fact is abundantly apparent to all thinking minds. The great cataclysm of war has wrought changes in our social structure of every sort and kind; changes both good and bad; but our optimism leads us to think that when the great upheaval has subsided, it will prove to be a great sifter of human hearts, and the changes will—in the main—be for the good of mankind, for human betterment generally. As proof of this contention it is noticeable in a marked degree that people of torpid minds, who usually allow their minds to be controlled by newspaper-mongers, are beginning to do a little thinking on their own account, to acquire a sense of corporate responsibility, and to realise that much of the evil that is now happening is due to our neglect in this respect in the past. This is a wholesome sign.

We wonder if this good moral heart-tonic effect is sufficiently noticeable among trained nurses? Do they interest themselves in the wider issues of life; are they stirred by the live forces for good and evil around them? Are they making any contribution—small or large—towards the solution of the many and great problems that confront us in this country and many others to-day—national problems, international problems? Or are we still to have the dull lifeless cry: "I have no time." "I am too busy." "I am too tired." "It does not interest me." This last excuse is selfish and inexcusable; the others might be reasonably made by many other people besides nurses, who work quite as hard, and are quite as busy. It will not do. A new and better day is dawning; we are on the threshold of a

new era, and we must be new men and women, ready and willing to have new hearts and minds, renewing our strength to meet the new insistent demands that will be made upon us. "Life is real, life is earnest" now, and the practical realisation of this is the only thing that brings true satisfaction.

Almost every great question is—in the ultimate resort—a health question, and therefore an appeal to the well-trained, intelligent selfless nurse—the guardian of the nation's health. Here are some big comprehensive ideas for her consideration. The housing problem, to take the most fundamental. Is there a nurse so apathetic as to declare she takes no interest in it? Surely not. It touches everything of the most vital importance—health, happiness, morality. Our highest aspiration in respect of Infant Welfare, and ante-natal care of mother and child, cannot be realised, until a proper standard of healthy housing is established. An A.I. race cannot be produced from slums. The new era will not countenance slums.

To take a wider outlook still, does not the establishment of an International Health Bureau—an important item embodied in the policy of the League of Nations—interest trained nurses? It does not require any great stretch of imagination to realise the incalculable benefit that would accrue to mankind, by an effective international instrument for the prevention and control of disease. Great epidemics, spreading all over the world, would be under such judicious control that the present resulting high rate of mortality would not be possible. These are questions of vital importance, and nurses must wake up to a sense of their responsibilities concerning them.

## OUR PRIZE COMPETITION.

### WHAT ARE SOME OF THE REASONS FOR THE SHORTAGE OF NURSES TO-DAY?

We have pleasure in awarding the prize this week to Miss Ména M. G. Bielby, Cranford, Middlesex.

#### PRIZE PAPER.

It has been truly said that it is the last straw which breaks the camel's back: in other words, the drawbacks to any career are usually cumulative. In the case of nursing the last straw is the overwhelming preference shown during the war for the unskilled, partially trained V.A.D., and the wholly untrained commandant of social position and large means. By these the fully qualified nurse of long experience has been flouted as a "paid nurse." Naturally the educated and cultured women among nurses have deeply resented this attitude. They express their feelings on the subject to their friends, and so, in ever widening circles, the opinion spreads that nursing as a career offers no inducement to the best class of young women, particularly as there are now many other good openings.

In the case of the less educated, who are frequently not only entirely dependent upon their earnings, but have to assist in the support of relatives, the low rate of hospital pay, and comparatively short working life constitute a bar. Here again better openings are now supplied by other occupations.

The old sense of vocation regarding nursing appears to be dying out. Other times, other manners. Nursing is now a scientific profession, protected by State Registration. If hospitals are to obtain the needful supply of probationers, adequate pay, and attractive conditions generally, must be offered in the place of the hardships and limitations of the past. If the sick public desire the best skill, and generous service, they must be prepared to treat private nurses as professional women; there are still many who refuse to consider them as other than upper servants; and the obsolescent idea still rules in the higher ranks of society—probably based on the essentials laid down for presentation at Court—that the woman who earns her income otherwise than by wifehood, or by her pen or paint-brush, is socially outside the pale.

In general hospitals much progress has been made regarding the nursing staffs during the last two decades; but in too many there is still the objectionable autocratic rule by laymen and matrons. It is just the type of woman who is equal to the manifold demands of nursing who will not tolerate tyranny, either during her

training or in her subsequent nursing service, and she decides against a career which implies this.

Perhaps it is too much to expect from a country which denies social recognition to its women teachers, even if university graduates, that it should extend such recognition to the trained nurses working in it. But until this is accorded our profession the public can never receive the highest value for the fees they pay, since women of high mental ability are deterred from embarking on nursing service. Private nursing duty, especially, calls for the highest and finest quality of heart and brain that can be brought to it; too often the women who can supply this are prematurely broken down by overwork during their hospital training, insufficient nourishment, endurance of cold, unnecessarily laborious tasks for which they are unfitted, and an atmosphere of worry or petty tyranny.

There is no real reason why nurse training schools should not offer the advantages of colleges in the matter of intellectual interests, libraries, games and amusements. There should be a levelling up on these lines instead of the levelling down that too often obtains at present amongst hospital nurses.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss P. Thompson, Miss J. Gordon, Miss M. Jameson, and Sister V. H. Hedges.

#### QUESTION FOR NEXT WEEK.

What is Vincent's Angina, or "Trench Mouth," and how is it treated?

## MEDICAL MATTERS.

### CANCER IN RATS.

Professor Leipix, of the London School of Tropical Medicine, is investigating the worms which have been shown by Professor Fibiger, of Copenhagen, to be a cause of cancer in rats. While it is not believed that these particular worms are concerned with cancer in human beings, there is a possibility that there may be other worms, with similar powers, capable of producing new growths.

### THE IMPERIAL CANCER RESEARCH FUND.

An interesting report was presented at the annual meeting, on July 22nd, of the Imperial Cancer Research Fund, at the Examination Hall, Queen's Square, Bloomsbury, when the Duke of Bedford presided. Sir William Church, in moving the adoption of the Report, said that, "before we could plan a rational method of treatment it would be necessary to know more of the vital processes in cancer cells and the nature of the very delicate differences between them and the normal."

## NURSING ECHOES.

It is a calamity that the Committee of the Birmingham District Nursing Society have announced that they are unable longer to carry on its work owing to lack of financial support, nor is it creditable to a wealthy city like Birmingham that this work, of primary importance to the health of the city, should only be supported to the extent of £750 by 350 subscribers when its inhabitants number nearly a million.

The expenses are increasing so rapidly that the Committee do not feel justified in piling up a debt which they have no prospect of paying off, and so have resolved to take the drastic step of reducing the staff of nurses by 50 per cent. and of nursing in only a few districts.

The work of Queen's Nurses is magnificent, and is a model for similar work throughout the world. But it can only be extended so far as charity permits, and the day of charity in relation to nursing is passing. (1) It has been largely supported by the middle classes of moderate means, who are not now in a position to help. (2) Then the working classes, many of whom are earning good wages, do not desire charity, and (3), now that we have a Ministry of Health skilled nursing should be available on a well considered plan applicable to all. This, no doubt is what will happen in the future, but in the immediate present the poor and the community will suffer unless existing charities are maintained.

A project is under discussion for the establishment of a residence and club for nurses in Aberdeen and the North of Scotland. It is felt by those moving in the matter that there is need of some social centre for nurses in this part of Scotland. The idea is to secure a house large enough to provide clubrooms and a certain number of bedrooms, which would be open to all nurses, both those engaged in hospital and public institutions and those engaged in private nursing. At present there is no common meeting place for nurses. They have to remain in the rooms provided by the hospital in which they are engaged, and if they go out for a walk there is no resort for them in the city, unless it be some public tearoom or picture house. The club which it is proposed to start would provide a lounge and a tearoom where meals could be provided. There would be facilities for reading, and bedrooms would be available where nurses off duty for a few

days, or visiting the city, could obtain accommodation.

We hope, if this project materialises, that the liberal policy of the Scottish Nurses Club at Glasgow will be followed, so that membership will be open to all the city's nurses, and that they will not be compelled to belong to the College of Nursing, Ltd., or any other organisation, before they can become members. As Lady Cowdray is busying herself in the scheme of the Aberdeen Club the warning is not unnecessary. Cliques in a small centre like Aberdeen would be most undesirable.

The *Irish Citizen* states:—"The College of Nursing and the Irish Nursing Board have accepted fees from Nurses for placing their names on their "Registers," but the State Register, which is to be compiled under the Nurses' Registration Act renders these unofficial "Registers" useless—if they were ever anything else. Obviously the College and the Board ought to refund to the Nurses the guineas they have wasted. Instead, it is rumoured, they are trying to make some arrangement to secure special registration terms for these Nurses, perhaps with the idea that by so doing they may secure a lasting control of the Nursing Council. As Parliament deliberately refused to give special consideration in the way of Registration to any organisation of Nurses, this rumoured manœuvre ought not to succeed.

"The College of Nursing is considering the desirability of instituting a regular annual subscription. If it is not careful the College may develop into a real, live, democratic Trade Union, and that would be a horrible shock to some of its leading members."

The Irish Nursing Board made no pledge that those nurses who placed their names on its voluntary Register should, *ipso facto*, be placed on the State Register, as the College of Nursing, Ltd., did. All the same, we agree with the *Irish Citizen* that preferential treatment for the members of any Nurses' Organisation, so far as State Registration goes, is entirely wrong in principle. The General Nursing Councils, especially as they are judicial bodies, should maintain strict neutrality in this connection. What the Nursing Profession demands is equality of opportunity, so far as the Acts provide, for all nurses. Fix a fee for existing nurses—it cannot be more than the infinitesimal guinea—and let all who value legal status pay it.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

## THE ASSOCIATION OF TRAINED NURSES IN PUBLIC HEALTH WORK.

### LECTURE BY COUNCILLOR BEATRICE KENT.

Mrs. Earp, Educational Organiser of Infant Welfare Centres in Hampstead, took the chair at a meeting at 10, Orchard St., London, W., recently when Councillor Beatrice Kent gave a most interesting address on "Civic Duties and Responsibilities." In introducing the lecturer Mrs. Earp congratulated her audience on their being able to listen to one so well qualified to speak on the subject; it was one of great interest to everyone, for people had thought so much more about civic responsibility since the war.

Miss Kent then presented her paper on

### CIVIC DUTIES AND RESPONSIBILITIES.

I am optimist enough to think that, out of all the turmoil and chaos and gross materialism of the present day, and which we hear—*ad nauseam*—is the result of the great war, a new and better world will emerge; indeed, it is already emerging, like a new growth struggling through a hard and inhospitable soil.

A greater sense, and more lofty conception of citizenship is going to be the redemptive power of all civilised countries I think, and it is this force—patriotism, at its best and highest—which is going to restore the lost equation. With this vision, which I trust you will share with me, we can "greet the unseen with a cheer." A writer on the subject of civics has said:—"If interest is sufficiently strong, it will bring knowledge; without interest, the so-called citizens are a fluid mass, drawn hither and thither by any tide of chance feeling, if they are moved at all. Indeed, the right to vote should be dependent on the elementary qualification of having some *personal care for public affairs*." This is a fine expression of the writer's earnest sense of civic responsibility. I will ask you to listen to one more quotation. Professor James Ward in his "Personality—the Final Aim of Social Eugenics," gives utterance to this beautiful truth:—

"The value of a single man or woman of open mind, independent judgment and moral courage, who requires to be convinced and refuses to be cajoled, is only concerned to be right, and is not afraid to be singular, deferring to reason and not to rank, true to self and therefore not false to any man; the value of such a man or woman, I say,

is priceless; a nation of such would leaven and regenerate the world. That is the true national education at which England should aim."

That person of course would be the ideal citizen. It tends to stimulate interest, and stir our sense of gratitude to pioneers and pathfinders, to look back and recall what they have done, and compare it with what is being done in our day, on the same lines; we shall probably find to our astonishment that we are taking credit for initiating things that are not at all new.

Looking back many centuries, the names of two lawgivers stand out prominently as good citizens, because they were good public health workers; (1) the Hebrew Lawgiver, Moses, who lived more than 1,400 years before Christ; (2) the Spartan Lawgiver, the Prince Lycurgus, who lived between 800 and 900 years before Christ. We are perhaps more familiar with the useful laws governing health laid down by Moses, than we are with those of Lycurgus. The latter was an infant welfare worker—his laws were much in advance of those of Moses. Indeed, he seems to have been much in advance of his own time. Lycurgus was the first to make laws for the preservation of the life and health of the mother and child. He also laid down laws for the ante-natal care of the mother. The most tender care had to be given to the expectant mother. The pregnant woman was regarded and treated as something sacred. But Lycurgus went further than that; he was a Eugenist, he would not allow any but healthy people to marry. This then is the secret of the traditional health and beauty of the Spartan race.

Now compare this fine sense of civic responsibility with the barbarism of our own country less than 100 years ago. When Queen Victoria came to the throne in 1837 there was not a single Act on the Statute Book in the interests of the child—the child had no rights whatever. It is on record that a little girl of nine was sentenced to death for burglary; her offence was that she had broken a pane of glass and stolen a paint-box. The sentence, however, was not carried out.

About four and a-half centuries later than Lycurgus we have the great genius, the Greek philosopher Plato, with his vision of a well-governed country, providing for the health and happiness of all. This has been handed down to us in his immortal classic, "The Republic." It



was the product of a master mind, with a sense of civic responsibility.

One wonders if it is our country's poor appreciation of education which has caused the break in the continuity of these obviously necessary reforms, suggested by great minds of the past. Of course, we have had our many great and grand philanthropists—to mention just two, John Howard and Elizabeth Fry—but our rulers for many centuries have shown a deplorable lack of the civic sense. Why? Well I venture to say there is just one answer to that, namely, *Departmental jealousies and vested interest*. Those two accursed vices strangle the soul and sear the conscience. However, there are many signs that a new spirit is manifesting itself.

There is no more important branch of Civics than Public Health nursing in all its various branches; and as we stand on the threshold of a new era we are proud of the dignity of our new position. We have the Parliamentary franchise, and we have our professional franchise. We are now statutory "persons" for the first time.

This dignity carries with it responsibilities and duties of citizenship in a way we never had it before. How are we going to use this power? One can scarcely emphasise the importance of Public Health Nursing too much, because it would be true to say that there are no conditions of life which do not bear some relationship to health. The care of the sick is closely related to all community problems.

The thing of primary importance for the hour is quite obviously greater standardisation in Public Health Nursing, a universal curriculum. The need for it seems to be particularly needed in Infant Welfare Work. Surely there ought to be one standard of education, and one standard only, for all Infant Welfare Workers. I will not venture to elaborate this point, for two reasons. In the first place, there are ladies here who can speak with greater knowledge and authority than I can. Secondly, this matter will be ably dealt with by the new General Nursing Council. Miss Kent then referred to the Standard Curriculum for Schools of Nursing published in 1918 by the Committee on Education of the National League of Nursing Education, where provision is made for a course of instruction in Public Health Nursing. She said: "The exact reading of the section is, '*Introduction to Public Health Nursing and Social Service (Elective)*.'"

In the U.S.A. it is now recognised as necessary for a complete curriculum for the Public Health Nurse that instruction be given in such modern social problems as Labour Conditions, Immigration, Prostitution, Housing, &c. An intelligent understanding of social problems, other than those of sickness, is now generally recognised by experts in the Nursing world, to be necessary for the Public Health Nurse, "in order to promote the Civic betterment."

I believe that only graduate and registered nurses are now eligible for Public Health Nursing in the States. At least it was under consideration

four years ago by the National Organisation of Public Health Nursing.

I ask your indulgence for referring very briefly indeed to the League of Nations. I anticipate your objection; you are going to tell me perhaps that it is not cogent to the subject. Pardon me, I am going to prove to you that it is.

You perhaps know that an international health bureau is to be set up by the League of Nations.

Sir William Collins has written an article on the League of Nations and health questions. He reminds us that "under Article 24 of the Covenant, various International Bureaux may be placed under the League, if it is desired by the parties concerned." Some of these bureaux have among their objects the promotion of the physical welfare of children and mothers, and of general hygiene reforms. There is no more important body that should have representation on such bureaux than our International Council of Nurses. We shall only have to make application. All international bureaux created in the future will have to be under the League.

I think we should do well to establish something in the nature of a Central Committee on Public Health Nursing. We want greater co-ordination in this work of many branches, and a strong co-operative sense among the members. From a strong recognised body of this sort, we could pass resolutions urging Local Government bodies to give their attention without delay to such things as bad housing conditions, and for playing centres for children, unclean distribution of milk and other food, well-paved and well-watered streets which are essential to health.

The future is full of promise and potentialities. I have a vision of a great Commonwealth of Nurses throughout the civilised world, who being skilled and *State Registered* will take a leading part in all branches of Civics which are in any way allied to Public Health.

We have our Royal British Nurses' Association, the only body of women in the Kingdom possessing a Royal Charter. With the powers we possess under this Charter, together with those recently conferred by the Nurses' Registration Acts, we can remove mountains.

In conclusion, let me say that we can never forget that this great battle for emancipation has been fought under a noble standard, the standard of justice and truth and moral courage, unmarred by any stain of commercialism and self-interest. It is up to us to keep it at this height. May I claim the privilege of an older woman, and say to you young nurses who are going to reap where others have sown: have the courage of your convictions, and don't be afraid of other people, whoever they may be. Instead of grumbling at what you know to be wrong, protest openly against it, and fight it. Craven fear does infinite harm in the world; it stultifies effort, hinders progress, and vitiates the soul. The future of our great profession lies in your hands, upon you will largely depend the health of posterity—a great civic responsibility.

**BIRTH.**

Friends of Mrs. Lambert, of Fairfield House, Newlands, Lincoln, will be pleased to learn a little daughter has been born to her. Mrs. Lambert, who, previous to her marriage to Dr. Lambert was Miss Henrietta Ward, has many friends in the R.B.N.A., who send her good wishes and congratulations.

**MOVEMENTS OF MEMBERS.**

We learn that Miss May Noble is shortly to leave for East Africa to become the joint Matron of a nursing home. Miss Noble was trained at Charing Cross Hospital. We send her all good wishes for her venture.

**DONATIONS.****THE HELENA BENEVOLENT FUND.**

The Treasurer acknowledges with thanks the following donations:—

Misses Bickerton, Bird, Bratton, Neighbour, and Tait, 5s.; Misses Cowle and Stephenson, 2s. 6d.; Mrs. Hinckley and the Misses Colver, Dorrell, Elsey, Riches and Sayle, 2s.; Misses Chesham, Colville, and Lemon, 1s.

**PUBLIC HEALTH ACTIVITIES.**

"The nation's fan is in its hand; conditions inimical to health will, one after the other, be swept away, and it will not rest content until all 'old shapes of foul disease' have been exorcised and England has become as healthy as she is free."

—*Sir Malcolm Morris.*

**CORRESPONDENCE.****THE CHURCH OF ENGLAND HOMES FOR WAIFS AND STRAYS.**

*To the Secretary R.B.N.A.*

Old Town Hall,

Kennington, S.E.,

July 15th, 1920.

"DEAR MADAM,—May I be allowed on behalf of the Executive Committee to express our sincere thanks to you for the collection which you have so kindly made on the Society's behalf. I realise how much its success was due to your splendid work and self-sacrificing efforts. I would ask you to convey to your helpers our best thanks for their valuable assistance under most trying circumstances. Your help in these difficult times has been a great encouragement to us.

Yours faithfully,

(Signed) W. FOWELL SWANN.

Miss I. Macdonald,

10, Orchard Street, W.1.

The above was received in acknowledgment of the work of our members in connection with the Flag Day for the Waifs and Strays Society.

(Signed) ISABEL MACDONALD,

*Secretary to the Corporation.*

10 Orchard St., London, W.1.

**THE GENERAL NURSING COUNCIL.**

The seventh meeting of the General Nursing Council (the first to which the Press have been admitted) was held at the Ministry of Health, Whitehall, S.W., on Friday, July 30th, Mr. J. C. Priestley, K.C., in the chair.

The Chairman read a letter addressed to the Registrar from Mr. L. V. Brock, stating that he was directed by the Minister of Health to acquaint her, for the information of the General Nursing Council, that he had received an application from certain Poor Law Authorities for permission to admit probationers at an earlier age than 21. The Minister would be glad to have the advantage of the opinion of the General Nursing Council as to whether in their view it was desirable that the training of probationers should commence before 21, and if so at what age it might properly be begun, and what, if any, special safeguards were required. If the Council had not yet considered the Rules to be framed under Section 3 (2) (a) and (b) of the Nurses' Registration Act he would like to know at what age the Council proposed to admit Nurses to the Register.

The Chairman said that it was considered by some inexpedient to admit girls with no knowledge of the world to hospitals, for training, at the age of 18; were girls when they left school at that age physically and morally strong enough to begin training?

It was for the Council to decide whether an answer should be sent to the letter that day or later.

MRS. BEDFORD FENWICK proposed that the communication should be referred to the Education Committee for consideration, and this was carried.

The Chairman then said there was a further letter from the Minister of Health transmitting a letter from the Ministry of Labour in regard to the provisions of the Hours of Employment Bill, as they affected nurses. The Minister would be glad if the Council would consider the scheme submitted by the College of Nursing, not only with reference to the Scheme itself, but generally with reference to the nursing profession in all its branches. The Minister of Labour had asked for observations, from the Royal British Nurses' Association, the National Union of Trained Nurses, the Queen Victoria's Jubilee Institute, the Nurses' Co-operation, and the British Hospitals Association.

The proposal of the College of Nursing was that all Registered Nurses except Maternity Nurses should be included in the Bill, and that their time on duty should not extend to more than 56 hours a week, or exceed 10 hours in the 24 in any one day.

It was agreed that the letters of the Minister of Health should be circulated so that the Members of the Council might have an opportunity of considering them.

The Chairman presumed, in reply to a question, that the replies received by the Ministry of Health from the Associations above mentioned would be available for the consideration of the Council.

MRS. BEDFORD FENWICK proposed that consideration of the letter should be deferred until after the vacation, and considered at the next meeting of the Council, as the Hours of Employment Bill could not possibly be considered by Parliament till October.

LADY HOBHOUSE seconded Mrs. Fenwick's motion.

MISS VILLIERS said that the nurses in some of the Metropolitan Asylums Board Hospitals were already working 50 hours and less per week.

The resolution was carried.

#### REPORT OF SPECIAL MENTAL NURSING COMMITTEE.

DR. BEDFORD PIERCE, as chairman of the Mental Nursing Committee, moved that its report be received. The Committee had met twice, on the 16th and the 30th July. It suggested that the terms "Registered Mental Nurse," and "Registered Nurse for Mental Defectives" should be approved. It welcomed the recommendation of the Registration Committee that the certificate of the Medico-Psychological Association should be recognised as one of the qualifications for existing nurses during the period of grace.

In regard to the recognition of institutions the Committee was not at present in a position to make recommendations.

The Committee had had under consideration the position of "intermediate" nurses, *i.e.*, those who were not in a position to claim registration as "existing nurses," because they fulfilled the requirements defined for nurses who were at least three years before the first day of November, 1919, *bona fide* engaged in practice as nurses in attendance on the sick, but who completed their training before the Rules for future nurses became operative. It was of opinion that their position needed defining.

It recommended that Miss Tuke's name be added to the Mental Nursing Committee.

Commenting on the Report, as presented, Dr. Bedford Pierce said he was of opinion that it would be an advantage to recognise the certificate of the Medico-Psychological Association as a qualification for Registration on the Mental Nurses Register during the term of grace. He did not wish to pledge the Council any further, nor did he wish to ask that the names on the Register of the Medico-Psychological Association should be transferred *en bloc* to the State Register, but that its certificate should be recognised as evidence of training.

He moved that the Report be received. This was seconded by Mr. Christian.

MRS. BEDFORD FENWICK said that the Registration Committee had recommended that the certificate of the Medico-Psychological Association should be recognised as evidence of training in mental nursing during the period of grace, and without prejudice to the future. She moved that this be added.

DR. BEDFORD PIERCE seconded the recommendation, and it was carried unanimously.

DR. BEDFORD PIERCE then again raised the

question of nurses who began their training before November 1st, 1919. "Existing Nurses" were those who finished their training up to that date. There would be a certain number of "Intermediate Nurses" who began their training before November 1st, 1919, and were certificated after. It would meet the necessities of the case if the Council were satisfied that such nurses should be placed on the Register at its discretion.

THE CHAIRMAN said it was desirable to get the way perfectly clear so that the Register could be got ready for Existing Nurses.

DR. BEDFORD PIERCE hoped that the Council would make a pronouncement that day as to "Intermediate Nurses."

He then moved that the Report be agreed to.

The Council agreed with and adopted the Committee's Report, the consideration of the question of "Intermediate Nurses" being deferred till a later stage in the proceedings.

#### EDUCATION AND EXAMINATION COMMITTEE.

MISS COX-DAVIES then moved :—

"That the names of Miss Peterkin, Dr. Goodall and Dr. Bedford Pierce be added to the Education and Examination Committee."

This was agreed.

For the remaining vacancy on this Committee Miss CATTELL proposed the name of Miss Isabel Macdonald, and it was seconded by Miss Swiss.

MISS CATTELL said that Miss Macdonald had special qualifications for a seat on the Committee. She had a wide knowledge of health and sanitary questions, and was a most able teacher.

MISS LLOYD STILL proposed that Miss Cox-Davies should be added to the Committee. This was seconded by Miss Seymour Yapp.

MISS MACCALLUM said that there were already five matrons in active practice on the Committee, and only one working nurse.

MISS YAPP asked whether Miss Macdonald was in active practice.

MRS. FENWICK said that every one recognised that nursing education was primarily a Matrons' question, but if she might say so without offence, it was not so much a question of active practice as that Miss Macdonald was not a Matron. With herself there were already seven Matrons on the Education Committee.

There were wide educational questions in connection with National Health and other branches of nursing which found no place in the hospital curriculum, concerning which Miss Macdonald's special knowledge would be of value to the Committee.

Upon these names being put to the Council Miss Cox-Davies was elected to fill the vacancy by a majority of one vote.

#### INTERMEDIATE NURSES.

THE CHAIRMAN then read the following Resolution regulating the admission of nurses to the General Part of the Register :—

"Nurses who produce a certificate of not less than three years' training from a General Hospital

or Poor Law Infirmary, recognised by the Council for training for the General Part of the Register, which has terminated at any period after November 1st, 1919, but before the Rules to be made by the Council for the education, examination, and training of nurses become operative, shall be admitted to the General Part of the Register."

This was proposed by Sir Jenner Verrall, seconded by Mrs. Bedford Fenwick, and agreed.

Similar provisions applicable to the admission of Intermediate Nurses to the Male, Mental and Children's Supplementary Parts of the Register were proposed respectively by Miss Cox-Davies, Dr. Bedford Pierce, and Miss Worsley, and agreed.

In regard to admission of Intermediate Nurses to the Supplementary Part of the Register of Nurses trained in the Nursing of Infectious Diseases, Dr. Goodall proposed that the standard should be two years' training and certification, and one year's further service, as that was the standard at present in force. This was agreed.

#### PENAL CASES AND DISCIPLINARY COMMITTEE.

THE CHAIRMAN then moved item 7 on the Agenda:—

"That the Rules approved on Friday, July 23rd, as to the removal of names from the Register, and restoration of names to the Register be received and agreed to."

MRS. BEDFORD FENWICK drew attention under "Restoration to the Register of Name Removed" (Rule 3) to the provision that application for restoration to the Register must be supported by certificates from at least two persons, being Justices of the Peace, or Ministers of Religion, or Registered Medical Practitioners, who were well acquainted with the applicant before, and since, the removal of her name. She moved that the words "or Registered Nurses" be added, as it appeared an anomaly that young curates, or hospital chaplains, and young house physicians and surgeons were held to be responsible persons in this connection, whilst the Matrons and other members of the Nursing Profession were excluded.

There was a fundamental principle involved in this recognition. The intention of the Nurses' Registration Act was to raise the status of the trained nurse not only in her own profession, but in the body politic.

The motion was seconded by Miss Villiers, who considered the inclusion of Registered Nurses, as persons eligible to support applications of nurses for restoration to the Register, most important.

DR. BEDFORD PIERCE expressed the opinion that one of the certificates should be endorsed by a Registered Nurse.

MISS COX-DAVIES agreed that an important principle was involved. She supported the motion.

In putting the Resolution which was agreed, the Chairman said that nursing feeling appeared to be unanimous on this point.

The Report was then adopted.

#### THE REGISTRATION COMMITTEE.

MRS. BEDFORD FENWICK, Chairman of the Registration Committee, then moved:—

"That the Report of the Registration Com-

mittee as amended and added to this day be agreed to."

Mrs. Fenwick said that the Committee had met on July 26th, and the Draft Rules had been carefully considered. Certain verbal amendments had been made, and a letter considered from Dr. Bedford Pierce in connection with the admission of Existing Nurses to the Supplementary Part of the Register for Mental Nurses. She moved that the following recommendations from the Registration Committee be received:—

(1) That the Certificate of the Medico-Psychological Association be accepted by the Council as evidence of training and experience for admission of existing nurses to the supplementary part of the Register for Mental Nurses. This to apply to the period of grace only, and without prejudice to the future.

(2) That it be recommended to the Council that the certificate of the Fever Nurses' Association and of the Metropolitan Asylums Board be accepted by the Council as evidence of training and experience for admission of existing nurses to the Supplementary Part of the Register for Fever Nurses. This to apply to the period of grace only, and without prejudice to the future.

(3) That it be recommended to the Council that the first fee payable by an existing Nurse for admission to the Register shall be one guinea, and the further sum of half a guinea for admission to any and each further part of the Register to which he or she is admitted.

Mrs. Fenwick reported further that the Committee had also agreed (1) that a paragraph should be added to the covering letters to be sent by the Registrar to the Referees, intimating that all information received would be regarded as strictly confidential, and (2) that schedules sent to Referees should be marked confidential.

The Report of the Registration Committee (including the amendments to the Draft Rules for Existing Nurses previously received) was agreed and adopted.

#### ADVERTISEMENT OF PAID APPOINTMENTS.

MR. CHRISTIAN then moved:—

"That all paid appointments in connection with the work of the General Nursing Council shall be advertised in the public Press, and such appointments made by the Council."

This was seconded by Miss Tuke.

THE CHAIRMAN, after referring to the cost of advertising, said that whatever decision the Council arrived at, he hoped it would not include the solicitor. He should not like to advertise for a solicitor as he was quite sure the best people would not apply.

LADY HOBHOUSE said that they were all rather afraid on the question of finance. If it was unnecessary it was a pity to spend money in advertising.

MISS MACDONALD supported Mr. Christian's motion. Many nurses were asking whether appointments under the Council would be thrown open.

MRS. BEDFORD FENWICK said that nurses financed the Council, and she thought that the posts for the officials it employed should be thrown open and advertised.

SIR JENNER VERRALL, seconded by Dr. Goodall, moved that all full-time paid appointments should be advertised.

This was lost.

MISS COX DAVIES moved that the appointments of solicitor and auditors should not be included in the posts advertised. This was seconded by Sir Jenner Verrall and carried.

MRS. BEDFORD FENWICK pointed out that, according to the Act, the Auditors were appointed by the Minister of Health, therefore they could not be included in the Resolution.

On being put to the vote Mr. Christian's motion was lost.

#### BILLS AND CLAIMS.

SIR JENNER VERRALL, Chairman of the Finance Committee, presented Bills and Claims amounting to £124 17s. 10d.; of this £11 13s. 8d. was for expenses of selected candidates for the post of Registrar, £110 9s. 5d. for travelling expenses and subsistence allowance of members of the General Nursing Council, and £2 14s. 9d. for typing.

The Bills and Claims were passed for payment.

It was agreed that the Council should rise for six weeks.

The meeting then terminated.

### THE COLLEGE OF NURSING AND THE STATE REGISTRATION FEE.

The *Poor Law Officers' Journal* of July 30th contains the following comment:—

#### MORE LIGHT ON NURSES' FINANCE AND THE STATE REGISTRATION FEE.

"Some persons will find it a little difficult to fit together two of the more recent statements with regard to the registration and position of nurses. One of these refers to the combined Endowment Fund for the College of Nursing and the 'Nation's Fund' for Nurses. Sir Arthur Stanley, Chairman of the College, writing to Lord Burnham, says:—'You will, I am sure,' be glad to hear that the College has received very valuable support apart from that which has reached it as a result of the appeal in the *Daily Telegraph*, and that the Tribute Fund—that part of the Nation's Fund which provides for nurses in sickness and distress—has, thanks to your efforts, nearly reached the figure of £100,000 which is what we have set ourselves to obtain.'

"The other statement has reference to the original promise to nurses that if they would join the College of Nursing they would be 'automatically and without further fee placed on the State Register when the Nurses' Registration Bill is passed.' We quoted last week from the letter sent out by Sir Arthur Stanley on this matter. It is now reported that 'in reply to Sir Arthur Stanley's letter to members of the College of Nursing, the Secretary of the College is receiving a large number of letters full of appreciation and gratitude for all the achievements of the College, and many, anxious that there shall be no doubt as

to who is to pay the State registration fee, enclosed a cheque for one guinea.'

"The result should be very gratifying to the College. But is there not a possibility of further doubts, explanations, and financial evolutions? Here are a 'Tribute Fund,' an 'Endowment Fund,' and a sum of £100,000 on one side. On the other 'many nurses' are enclosing not postal orders, or 'Bradbury's,' but 'cheques'; evidences at least of financial ability, so anxious are they to remove any doubts about the fees. Or is it that their anxiety is with regard to registration?

"These 'many nurses who have sent cheques' have apparently greater belief and confidence in future possibilities than knowledge of business affairs. Why they should have opened their cheque books in such haste seems not to be explained, but perhaps on the understanding that instruction is one of the duties of a College. The statement proceeds to say that 'the Secretary, however, points out that until the Regulations under which nurses may have their names put on the State Register have been published, all that is known about the fee is that it cannot be more and may be less than one guinea. When the Regulations are published, members will apply individually to the Registrar of the General Nursing Council for application forms and all particulars, and will pay their fees direct to her. The same routine will be necessary for College members who state that they joined the College on the definite belief that that body would pay the State Registration fee, except that when they have paid their fees to the General Nursing Council they should write to the Secretary of the College enclosing the receipts, when the amounts they have paid will be refunded to them.'

"In more explicit terms, State Registration and its fee are not the business of the College. It would, as we hinted last week, have been ingenious at once to have made that explanation. With the return of the amount paid for the fee, including the 'many cheques,' this might have greatly strengthened the estimation in which the College could be held. It is right again to refer to this subject, for a contemporary article, apparently inspired, says:—

"The misconception as to the State Registration fee is evidently based on the following extract from a circular sent out by the College in June, 1916, of which some people remember only half: "Every certificated trained nurse should apply at once for registration by the College of Nursing (1) because the Council of the College of Nursing has drafted a 'Nurses' Registration Bill,' which provides that the Register already formed by the College of Nursing shall be the first Register under the Act. If, therefore, you are on the College Register you will, automatically and without further fee, be placed upon the State Register when the 'Nurses' Registration Bill' is passed." But the Bill was not passed, and therefore the provision lapses.'"

This enunciation of a moral principle is worth recognition, although there are people who would

describe it as a piece of cheap and flimsy strategy. It will be observed that in order to fix determination on the Bill that was not passed, the 'Nurses' Registration Bill' is placed within quotation marks, as it was not in the circular. Does this make any difference? The reader who is unprejudiced will form her own reply. It would be better still to hear the answer of any who, contributing a fee on such assurance, should happen to be informed that as with the conjuror's hat the pigeon was inside when he placed it on the table, but when he lifted it the bird had flown. More humorous is the remark in another article which states that if the original (1916) 'programme of the College, Ltd.', had been carried out, the consequence can now be foreseen. States Registration would have overweighted the engine provided with such care. A great part of the load of beneficent operations for the good of the nursing profession must have been dropped, and the College would have become little more than a recording body.' And as 'this specified' Nurses 'Registration Bill' never did pass, the result is that the College is left unfettered by State control.' State registration, therefore, now becomes a 'fetter' on a nurse. Is it better to be born blind or not to be able to foresee?"

In our opinion every guinea paid to the College Company for State Registration should be returned to the nurse who sent it.

It is the only honest course, and we call upon the College Council to adopt it without further subterfuge. Until this straightforward course is adopted the College policy merits justifiable mistrust.

## ROYAL AIR FORCE.

### MEMORANDUM REGARDING PATTERN OF R.A.F. NURSING SERVICE BADGES.

It is notified for information that new patterns of uniform and hat badges for the R.A.F. Nursing Service have been approved. These badges are as under:—

*For Wear with Outdoor Uniform.*—Winged caduceus of Mercury badge, surmounted by a crown, made in "all gilt."

*For Wear with Mess Dress.*—Winged caduceus of Mercury badge, as for wear with outdoor uniform, but with silver wings.

The position of these badges will be as follows:—

#### OUTDOOR UNIFORM.

(a) On the lapel of the Norfolk coat. The bottom edge of the badge to be one inch above the inner end of the step opening on the collar of the coat.

The staff of the badge to be parallel to the inside edge, and midway between the inside and outside edge of the collar.

(b) On the shoulder cape. The staff of the badge to be placed diagonally on the front corners of the cape, midway between the point of the cape and the turn of the band.

#### MESS DRESS.

As at (b) above.

The above patterns of badges will be adopted as from 1st September, 1920, and in the meantime badges of the old pattern should not be made.

The new pattern badges can be seen on application to E. 4 C. Air Ministry, W.C. 2.

#### HAT BADGE.

The R.A.F.N.S. metal badges and black mohair bow in front of the hat have been abolished, and instead, the members of the R.A.F.N.S. will wear the same hat badges as officers of the R.A.F., with a plain black mohair band.

P. YOUNG.

*Squadron Leader for D. of E.*

## APPOINTMENTS.

### MATRON.

**Canning Town Women's Settlement Hospital, Balaam Street, Plaistow, E. 13.**—Miss Elizabeth Ouston has been appointed Matron. She was trained at the Infirmary, Burnley.

**Southgate Isolation Hospital.**—Miss Dorothea Webb has been appointed Matron. She was trained at Kidderminster, and has subsequently been Charge Nurse at the Isolation Hospital, Norwich, Sister at the Victoria Hospital, Blackpool, and Matron at the Isolation Hospital, Mansfield.

**Marton District Hospital, Derby.**—Miss S. Maissen has been appointed Matron. She was trained at West Bromwich District Hospital, and has held the positions of Sister at the Guest Hospital, Dudley, the Royal Naval Hospital, Haslar, and of Sister and Deputy Matron at Droghda District Hospital.

**Palmer Memorial Hospital, Jarrow-on-Tyne.**—Miss Sarah G. Dalziel has been appointed Matron. She was trained at the Kilmarnock Infirmary, and has been Charge Nurse at the City Hospital, Hull, and Matron at the Fuschill War Hospital, Carlisle.

### NIGHT SUPERINTENDENT.

**Booth Hall Infirmary for Children, Blackley.**—Miss Winifred Arter has been appointed Night Superintendent. She was trained at Paddington Infirmary, and has since been Sister at Cox Heath Infirmary, and Booth Hall Infirmary. She is a certified midwife.

### SISTER.

**Horton Infirmary, Banbury.**—Miss Minnie Statham has been appointed Sister. She was trained at the General Infirmary, Burton-on-Trent, and has been Staff Nurse at the Royal Infirmary, Hull.

## WEDDING BELLS.

On Saturday last the marriage took place at St. Mary Abbott's, Kensington, of Miss Isolen Mary Moore, a member of the staff of the Registered Nurses' Society, and Mr. H. O. Wilson, of 10, Chartham Road, South Norwood. The bride received her training at the David Lewis Northern Hospital, Liverpool, and the Liverpool Maternity Hospital, and before joining the Registered Nurses' Society had experience of private nursing in the Isle of Man. On behalf of many of her colleagues this journal wishes her all happiness in her married life.

## THE PASSING BELL.

We regret to record the death at Inverness, on July 28th, of Miss Nancie Sophia Ella Tupper Cameron, R.R.C., late matron, Canadian Army Medical Corps, second daughter of Major-General Donald Roderick Cameron, C.M.G., and granddaughter of the late Sir Charles Tupper, a Canadian statesman, for many years High Commissioner in London.





**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

The logo for Boots Chemists, featuring the word 'Boots' in a large, elegant, cursive script. A banner is draped across the bottom of the 'Boots' text, containing the word 'Chemists' in a smaller, sans-serif font.

**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## THE HOSPITAL WORLD.

King's College Hospital, having decided to admit ladies on the Committee of Management, have now elected Lady Hambleden, the chairman of the Ladies' Association in connection with the Hospital, and the Hon. Mrs. Anthony Henley, who was associated with the Child Welfare work of the hospital during the war.

We congratulate the authorities of the hospital on recognition of the principle that woman should have seats on the Committee.

## THE END OF THE SACK.

BY A TRAINED NURSE.

I live in an out-of-the-way village on the sea coast, less than a hundred miles from London. We have no railway station nearer than seven miles away, and we are six miles from the nearest doctor. Till quite recently we had no district nurse, and when a Nursing Association was formed it was at first quite difficult to overcome the opposition and prejudice of the villagers. Our village is so far from the haunts of men that you can find grown-up men and women who have never been in a train, and most of the children have never seen a 'bus. We live at the end of the seven-mile road which leads nowhere else except to the sea, so that you might describe our village as "the end of the sack."

Before the advent of the nurse we were several times called upon to render first aid. One night, just as we were in bed, stones were thrown up at the window.

I went to it and called down :

"What is it?"

A voice replied

"Please will you come to my missus? She's bleeding to death."

No further information was forthcoming, and the box of bandages and lint was got out in readiness for whatever the injury might prove to be. Fortunately, the cottage was not far away. The case proved to be a burst varicose ulcer, and the only attempt the woman had made to stop the bleeding was to put her leg up on a chair. She was soon made comfortable and the fright of the family soothed, for the whole lot of them were in tears.

It transpired that a few years ago, before I lived here, a woman actually did bleed to death from a burst varicose ulcer. It is a pity that no one learnt from that disaster how simple a matter it is to stop the bleeding.

Early one morning, about four o'clock, there was a loud knocking at the front door. An agitated voice asked :

"Is there a trained nurse here?"

"Well, there is a lady who used to be a nurse. What is the matter?"

"Can you come to a lady who has been taken suddenly ill?"

"What is the matter with her?"

"I don't know. She is in great pain and we don't know what to do for her. She is staying at Crossways Farm."

Hot fomentations and the giving of an enema relieved the acute pain of the patient till a telegram could be sent to the doctor. Too much sea bathing and sitting about in a wet bathing gown was the cause of that sudden illness.

One morning I enquired as usual of the woman who comes in to do rough work for us how her little grandchild of about three months was.

To my utter amazement, she burst out crying, and said :

"It's dead, Miss."

"Dead?" I echoed.

"Yes, Miss. It had a fit last night and died."

"But why didn't you come in to us? We might have been able to do something."

"Oh, I didn't like to trouble you, Miss."

Nothing had been done for the poor, wee thing ; no warm bath given, no hot flannels or anything.

The following year the new baby had arrived at about the same age, when a messenger came rushing in.

"Please will you come to the baby? It's dying."

It was the plum season, and the mother having partaken of plum tart and the baby being seized with gripes, a whole teaspoonful of castor oil had been administered with direful results. A doctor was staying with us at the time and took a very gloomy view of the baby's chances. It had collapsed, and was apparently at the point of death. However, one drop of brandy and the application of hot flannels brought it round.

About three months later, or less, he was ill again. This time, as he was cutting a tooth, he had been given a green apple to suck. A green apple is a favourite remedy here for teething troubles. I have never met with it anywhere else.

This time I gave the mother a good talking to, whereupon she said plaintively :

"I can't think why my baby can't take things like other children. There's my friend's little boy, Reggie, always has had a bit of whatever they had; he'd cry for cheese before he was a year old, and they'd give him cockles to suck before he could talk. And look what a healthy child he is!"

Funnily enough, some of them do survive. But how much of the bad teeth and other troubles from which the school children suffer is due to this early feeding, it would take someone more eloquent than myself to convince them.

Perhaps the district nurse will be able to do so!

## A WORD FOR THE WEEK.

Whoever may

Discern true ends here shall grow pure enough

To love them, brave enough to strive for them,  
And strong enough to reach them, though the  
road be rough.

E. B. Browning.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE "COLLEGE" REGISTRATION PLEDGED GUINEA—NURSES TAKE WARNING!

## A FOOL AND HIS MONEY ARE EASILY PARTED.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—During the passage of the Nurses Registration Bill, when the College of Nursing, Ltd., wished to impress Parliament, they declared that they expressed the opinion of 16,000 odd nurses.

I clearly remember a visit to Guy's in 1916, when some of those who blindly wandered into the College compound were scandalised when I suggested the probability of things turning out as they have now.

(1) The probability of the "College" Bill being thrown out, which process I pledged myself to help.

(2) The College members being left without power of appeal—as they are at present—I wonder how that subtle professor explains this away now to guileless nurses? He used to assure them "right of appeal was allowed by the College" "only in their Bill," I was wont to add, "which may never become law," and now, thank goodness, is dead!

(3) That the "College" had no right to pledge Parliament to accept their register, and probably would be forced to refund the money. I said then, as I do now, that if such a pledge were offered and wriggled out of in commercial circles those responsible would be severely handled.

College members would do well to inquire how their money has been invested or, more likely, expended. Sir Arthur Stanley refers to the College programme being spoiled if the nurses demand their legal rights. It seems to me that a programme which opens with such jugglery might well be destroyed, and one compiled by nurses substituted, which would omit items (1) lay control, (2) sleight of hand.

It is for the nurses who have been "had" to take a firm stand and demand back money solicited, given, and received under (we now learn) misapprehension, in order to save their fellow-nurses from worse treatment in the future.

By all means let us have an educational college, but let the foundations be clean and stable, and the control in the hands of the profession.

I am, &c.,

J. B. N. PATERSON,  
Formerly Sister Guy's Hospital, Member  
Trained Nurses' Professional Union,  
Public Health Dept., Royal Borough  
of Greenwich.

## A FORTY-EIGHT HOUR WEEK FOR IRISH NURSES

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The paragraph in your issue of July 17th does not quite accurately represent the position of the Dublin Corporation in regard to the introduction of an eight-hour day in the City Hospitals. The matter was not postponed for six months, but was referred to the Estates and Finance Committee, who are now in correspondence with the hospitals and with this Union concerning it.

We realise, of course, and we have no doubt that the Corporation Committee realise equally that neither an eight-hour day nor a forty-eight-hour week can be introduced by a mere stroke of the pen. But some hospitals in Dublin already work only an eight-hour day, and it is therefore not unreasonable to expect that the remainder will be able to do so sooner or later. At the same time, I should like to make it clear that this Union does not ask for an eight-hour day, but for a forty-eight-hour week, or a ninety-six-hour fortnight.

Yours faithfully,

M. MORTISHED,

Secretary, The Irish Nurses Union.

## REPLY TO CORRESPONDENTS.

The Editor begs to thank her various correspondents for their letters *re* "Ranks for Service Nurses," and their offers of support. The Parliamentary Council will not meet until September, when the matter will receive first consideration.

## KERNELS FROM CORRESPONDENCE.

## NURSING BY THE CLOCK.

Miss Mary Simpson.—"If private nursing is to be limited by law, private nurses had better at once begin to look round for other work—the public cannot afford to pay higher fees. I have been a private nurse for twelve years—most of the time at a £2 2s. fee. I have been adding up my 'makings' before and after I raised the fee to £3 3s. I find in 1917, I was engaged forty-six weeks at £2 2s., board and lodging, and took £96 12s. Last year, at £3 3s., I was only out thirty-nine weeks and took £122 17s. but board and lodging and washing for the extra seven weeks ran away with £15, so that all I gained was £7. Another point was that I nursed nearly as many cases, but for shorter periods. If overtime has to be paid patients will keep us for still shorter periods, and this means more and more wear and tear. I do hope we shall not be interfered with by the Hours of Employment Act.

I note Miss Adelaide Murray's colleague does not include spittoons in her 'extras.' To my mind keeping them sanitary is the most repulsive duty a nurse has to perform."

[Many private nurses share the opinion of Miss Simpson. If paper spittoons are used they can be burnt without cleansing.—ED.]

## OUR PRIZE COMPETITION.

August 14th.—What are the principal causes of malnutrition in the school child, and what are its effects?

# The Midwife.

## MIDWIFERY AND NURSING IN PARLIAMENT.

### NURSING IN PRISONS.

In the House of Commons, on July 28th, the Right Hon. Edward Shortt, K.C., Secretary of State for the Home Department, gave the following written answers to Major Hills in reply to his questions as to nursing in prisons:—

#### BAGTHORPE GAOL, NOTTINGHAM.

Major Hills asked the Home Secretary whether his attention has been directed to the birth and death of a child in Bagthorpe Gaol, Nottingham; whether Bagthorpe Gaol has a resident trained and certificated maternity nurse; and if she was in attendance at the birth?

Mr. Shortt: A certified midwife was employed and was present at the confinement. In such a small female prison there would be work for a "trained and certified maternity nurse" only on rare occasions and the services of a certified midwife are obtained from outside when necessary.

#### PRISON HOSPITALS (NURSING STAFFS).

Major Hills asked the Home Secretary what regulations are in force in prisons to-day in regard to the training and qualifications of nurses; whether the staff of prison hospitals are permanent officials; and if they come under the Superannuation Act?

Mr. Shortt: Before an officer can be appointed to the hospital staff of a prison the Regulations require that he or she must undergo a special course of training at a prison hospital training school and must be reported as fit in all respects for the duties. These hospital staff officers are all permanent officials and come under the Superannuation Acts. It is sometimes necessary in exceptional cases, such as that referred to in the previous question, to call in special assistance from outside the prison service.

Major Hills asked the Home Secretary the number, qualifications, and status of the nursing staff at Holloway Prison?

Mr. Shortt: A duly trained hospital staff is in course of formation. It will consist of—

- 1 Hospital Lady Superintendent.
- 2 Principal Nurses.
- 48 Nurses.

Particulars of the qualifications and status of the hospital staff have been given in reply to another question by the hon. and gallant Member.

At present we understand the intention of the Commissioners is to form a special Training School at Holloway Prison for female permanent officials, giving them a six months' training under a hospital lady superintendent in this school, followed by a further three months at the London Hospital. It is intended that there shall be at least one nurse

at each female prison, and there will be a reserve at Holloway for duty at any moment at any prison where emergency may arise, for nursing either male or female prisoners.

The report of the Penal Reform League says in this connection: "We hope the Nursing Societies will press upon the Commissioners the need for developing this scheme until we have a service of fully trained nurses in our prisons, not wardresses with 'a little knowledge.'"

The qualification for appointment to the nursing staff at Holloway should be that of "Registered Nurse." The training school in the prison could then be utilized for giving special instruction in prison nursing.

## GLAXO AS A FOOD FOR INFANTS.

The value of Glaxo in Infant Feeding, when breast feeding is impossible, is well recognised, for during the last 14 years Glaxo (155-157, Great Portland Street, W.1), has successfully provided a full-cream milk. Clinical experience has shown that most normal infants can take a Full Cream Dried Milk perfectly well, practically from the earliest days of infancy, certainly after the first three months of life, but there are some babies who show a marked intolerance of fat, and others, such as premature infants, who do not thrive immediately on a milk with a high fat content.

To meet these cases, at the request of several authorities, Glaxo has now been produced in a Half-Cream form and a Three-quarter-Cream form, giving the analyses shewn below. The former is known as Glaxo No. 1 (Half-Cream) and the latter as Glaxo No. 2 (Three-quarter-Cream). The second has been utilised with success for infants between the ages of 2 and 6 months in tropical climates such as India, where it has been demonstrated that infants thrive better on a milk with a lessened fat percentage than on a Full Cream Milk. An infant, owing to the risk of a deficiency in the anti-rachitic factor, should not be kept on the Half-Cream Milk for a long period, but this preparation should only be used temporarily until the fat tolerance is established and Full-Cream Glaxo can be utilised.

#### ANALYSES.

	NO. 1 GLAXO ( $\frac{1}{2}$ -cr.) per cent.	NO. 2 GLAXO ( $\frac{3}{4}$ -cr.) per cent.
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Moisture .. ..	3.20	3.20
	100.00	100.00

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## EDITORIAL.

### THE NEW STATUS.

Few will deny that the work—the glorious work—of reconstructing the vast devastated area of our shattered civilisation is open to all; all are eligible, without any distinction of sex or other artificial barrier. The thinkers, the talkers (in the best sense) and the doers, can all—if they will—make contributions to the great architectural scheme. We can, if we will, make the well-worn phrase, “a new Heaven and a new Earth” *mean* something real and true. But—and it is a great but—we must have a great strong operative principle to guide us. Very much could be said on this point, but we will confine ourselves to our own department of it, namely, the new status in the nursing world.

A new day has dawned for us, a new life has begun. December 23, 1919, gave birth to the profession of nursing in the United Kingdom. Before that date, nursing the sick—whether by the trained or untrained—was a mere occupation. All nurses would do well to ponder over this and ask themselves (or others) what it really means. Those who are indifferent to a matter which is going to affect their profession so vitally, must surely lack both insight and enthusiasm, and those who are lacking in enthusiasm “have no health in them.” We had the honour and privilege of being in the House of Lords on the day mentioned above when the Bills for the State Registration of Nurses (a) England and Wales, (b) Scotland, (c) Ireland, received the Royal Assent, and were forthwith placed upon the Statute Book. We are aware that the regular readers of this journal know how vitally this legislation affects them, but we mention it in the hope that it will

reach the eye and the mind of some who do *not* know it. We have had a recent opportunity of speaking to very many nurses upon this important matter, and we have felt amazed to find that there are nurses who do not realise the dignity and value of the new position. The victory now gained is the result of a campaign lasting over thirty years. The new legal status of the nursing profession will bring great changes; with privileges come responsibilities, and if those nurses who are going to reap where others have sown do not rise to them and “march breast forward” they will be left far behind.

There are many vistas opening up before the nurse of to-day, and the nurse of the future, not only in the care of the sick but in preventive work. The prison doors are swinging open to admit her to minister to the minds and bodies of their occupants; her services are in demand in the male wards of mental hospitals, and in many other branches. But from whatever branch the call comes, the quality needed is the same—the best.

The registered nurses of the future should be students of nursing history, and conversant with the modern reform movement—those, in fact, who are possessed of the spirit of Nursing, the spirit of Understanding, the spirit of Health—good citizens likely to be of valuable service to the community. Such nurses will be the towers of strength needed to consolidate the profession; they will be best fitted to pass on the torch of light and learning to posterity. Such women, repositories of all that is best and noblest in nursing will be at once the hope and the glory of our beloved profession. We believe that a new and better time is coming, not for the members of the nursing profession only, but for the sick and the whole.

## VINCENT'S ANGINA OR TRENCH MOUTH.

By IRENE MORTON, R.N.

*Colorado Springs, Colorado, U.S.A.*

During the past few months there have been a number of cases of Vincent's Angina or "Trench Mouth" under treatment at this office, and a great deal of it, in town. The dentists and doctors working together with the city health officers, are doing their utmost to prevent any further spread of the disease. Because this is strictly a tourist town during the summer months, and hundreds of people come here from all over the country, it is impossible to prevent epidemics from appearing. Only by means of the strictest regulations on the part of the city health department are such epidemics prevented from being spread broadcast.

There are a few facts about Vincent's Angina, that I gathered during the recent campaign against the disease that I, as a nurse, did not know, and which I think other nurses may be glad to know. Vincent's Angina is an infectious and contagious, ulcerative stomatitis due to the activities of the bacillus fusiformis and a long, thin spirillum easily identified by a microscopic or bacteriological examination. The two forms of microbes are invariably present at the same time. A microscopic examination will distinguish the bacillus from the Löffler or diphtheria bacillus which it somewhat resembles. The bacillus is sometimes found in healthy mouths but is active only in cases of lowered resistance of the tissues. The most common source of communication is through the use of dishes which have not been thoroughly sterilised after being used by one suffering from the disease.

The onset of the disease is sudden and is characterised by considerable pain in the gum tissues, slight fever and a general debility. Surrounding the necks and between the teeth, more frequently the incisors and the third molars (it may be about only one tooth) may be found an irregular shaped, grayish or yellowish white necrotic membrane. Upon removal, a painful, freely bleeding surface is revealed. Mastication is painful and, if a large area is involved, practically impossible. The gums become a dark red and have a puffed appearance. If not checked in an early stage, there is sloughing of the tissues around the teeth. There is a general soreness and loosening of the teeth.

The disease also attacks the cheeks, lips, tonsils and larynx. The entire mouth is con-

gested extending to the tonsils, fauces and soft palate. One young lady suffered from a supposed attack of tonsillitis for almost a week before the disease was recognised. She carried a temperature of 102 degrees, with aching of the muscles and joints, tonsils red and slightly enlarged, with white patches here and there.

On the western battle fronts, "trench mouth" was one of the most common disabilities of the soldiers, incapacitating them for from three days to three weeks. There was some of it in the camps in this country.

One unfortunate thing about it, is that it will seemingly be entirely cured and will suddenly break out anew in another part of the mouth. While it is not pyorrhea, it may leave the gums in such an impaired condition that pyorrhea will readily follow.

The belief that the disease was due or was present more often in uncared mouths has not proven true in this country. In the trenches the men were, of course, unable to observe the rules of sanitation, but here the disease is frequently found in the mouths of people who take excellent care of their teeth at all times. One young man, who has always taken splendid care of the teeth, travelled all over the war zone as a newspaper correspondent for eleven months without a trace of the disease. After he had been back at home for six months, he developed it in a most pernicious form. The only source to which he could attribute it was the use of glasses at soda fountains.

The treatment consists of first cleansing thoroughly the field of infection with peroxide undiluted, then cauterizing the places of attack with a solution of equal parts iodine and phenol. In advanced cases, a saturated solution of silver nitrate is used, and a five per cent. solution of sulphuric acid. Using a strong solution of soda to rinse the mouth directly afterward, has been found effective. A mouth wash of three per cent. peroxide is ordered before and after eating, and a nourishing diet of liquids and soft solids. The diet is very important, if healing is to take place properly. All mechanical irritation, such as brushing the teeth or eating hard toast is discontinued until one is fully cured.

We regret that we have received no paper to which we can award a prize in reply to our question "What is 'Vincent's Angina,' or 'Trench Mouth' and how is it treated?" We therefore reprint the above excellent paper from the *American Journal of Nursing*.

### QUESTION FOR NEXT WEEK.

What are the principal causes of malnutrition in the school child, and what are its effects?



## NURSING ECHOES.

Her Majesty the Queen has graciously consented to become Patroness of the Chartered Society of Massage and Medical Gymnastics, which, it will be remembered, was formed in June last by the amalgamation, by Royal Charter, of the Incorporated Society of Trained Masseuses (which had its headquarters in London), with the Institute of Massage and Remedial Gymnastics (with headquarters in Manchester). The Chartered Society is desirous of giving publicity to this amalgamation, and to the special advantages for registration under the new body open to all masseurs and masseuses, and its Council looks forward to a successful future, with the power behind it that comes from union, in overcoming difficulties amongst the professional workers, and in bringing about a spirit of harmony and active interest in the welfare and advancement of the profession of massage generally. Trained nurses are keenly alive to the desirability of holding a certificate of massage, and will no doubt wish to obtain that of the Society which has the advantage of working under the powers conferred by a Royal Charter.

The announcement made by the Bradford Royal Infirmary, that a six months' course of training has been arranged in connection with its venereal department, for trained and certificated nurses, is one of which nurses should gladly avail themselves, for so far the opportunities of regular instruction in this branch of work have been very limited. At the same time, it is one with which all nurses should be acquainted. They may at any time meet with venereal disease as a complication of some other illness, they may be called upon to nurse patients suffering from venereal disease or one of its complications; the knowledge they should possess in such a case should be adequate, and they should by training have become skilled in the performance of the duties they have to carry out. We are aware that this branch of work is not popular with nurses, firstly, no doubt, because of their lack of the special training necessary, secondly because they usually associate these diseases with wrong doing on the part of the patient. That is a mistake. The wise nurse limits her outlook to the prevention and cure of disease, and the skilled relief of suffering; she does not hold office as a judge of the causes whereby disease has been contracted. Many of those, moreover who have exposed themselves wilfully to infection are sincerely to be pitied for the

terrible penalty they have to pay as the result of transgression.

And what about those who contract these diseases innocently? The wife with ruined health, the baby in danger of blindness, the little children who will never grow straight and strong? Surely every nurse worthy of her calling will work to equip herself by every means at her disposal to render the most effective help to these tragic sufferers. We rejoice to know that the Royal Infirmary, Bradford, offers nurses the means to do so, and pays them a salary at the rate of £45 per annum meanwhile. A certificate is granted at the successful conclusion of the course, of which full particulars may be obtained from the Matron. We can imagine no more useful service to the community than to assist in the reduction, and we may hope the eventual eradication, of venereal disease.

The *Glasgow Evening News* says in reference to the Nation's Fund for Nurses, denounced at the recent Professional Union of Trained Nurses meeting:—"It has long been an open secret that this fund is not popular with the best class of women, who are deeply ashamed that subscription sheets have been sent out on their behalf to regiments and ships."

Discussing the relation of the Library to the Hospital, Miss Julia E. Elliott says:—"The library is the literary research laboratory of the hospital."

Writing on the "Progress of Nursing Education during 1919" in the *Modern Hospital*, Miss Isabel Stewart, Assistant Professor, Department of Nursing and Health, Teachers' College, New York, states that:—"The cause of the acute shortage of student nurses in the rank and file of the nursing schools ante-dates the war. The root of the trouble is largely economic. The remedy lies in better provision for the nursing service in hospitals, in order to enable them to provide conditions which will attract young women in larger numbers. These conditions are: Shorter hours of duty; less housework (at least after the elementary period); better housing conditions; improved teaching personnel, equipment and methods; wholesome recreation and social life; the elimination of the old rigid system of military discipline, and a greater measure of self-government."

## WORKERS CLOSING UP THEIR RANKS.

The Poor Law Workers' Trade Union recently held a most successful meeting at Chelsea Town Hall, at which the Chairman, Mr. W. D. Wiggins, Medical Superintendent of the Greenwich Infirmary, Vice-President of the Union, was influentially supported on the platform, amongst others by Miss Parsons, of the Professional Union of Trained Nurses.

Mr. A. Lewis (Assistant Secretary) gave a most hopeful report, and said their great purpose was to unite the above Poor Law Service into one great, effective trade union—the policy of the Union has always being to proceed along the lines of negotiation. They had on the previous day completed an agreement with the Asylum Workers' Union Committee by which they would federate these two great unions of public servants into one great organised body. Each to retain its identity, but each to have behind it the whole force of the other. That was a step towards the unity of the Public Health Services.

### TRAINED NURSES' PROFESSIONAL UNION.

Miss Parsons, of the Professional Union of Trained Nurses, said she was delighted to have the opportunity of speaking, because she felt very strongly, after 23 years' experience in the nursing profession, that it was time nurses had some organisation. Nurses had for years been wanting better conditions, improved salaries, shorter hours of duty. They had felt for years that they were not giving of the best within them, because they were getting worn out too fast. Many times during her three years' training she had gone supperless to bed and cried herself to sleep after working 14 or 15 hours; and three days out of seven she had had to undertake twelve solid hours of duty without a break. Those days, she was glad to say, were no more. Still, there was a good deal of ground for complaint and matter for improvement. Nurses had wakened up to the fact that there was a method they could themselves adopt of improving their conditions and getting those conditions they felt they ought to have. Whilst a real wrong remained they must fight to get it righted, if they could not remove it in any other way. Her own policy was to try the milder ways first. With regard to the nursing profession, this had always been a very difficult thing, because nurses were often treated more like machines than human beings. They were not supposed to have a mind of their own. After all was said and done, everyone, without exception, was gifted with a certain degree of intelligence. Now, why should not that degree of intelligence be recognised? No worker, whatever her status in the nursing world, should be treated as a machine. After a good many years of stagnation and sleepy lethargy nurses had formed an organisation for the betterment of their conditions. At the end of three months they obtained recognition and registration as a professional union and ever since

the first week in January last their numbers had been swelling.

### NO STRIKE CLAUSE.

Miss Parsons said that the constitution of the Union was a most reasonable one; and they differed from most Unions in this, that they had no strike clause. They had met with a good deal of opposition on this point, but they had decided to leave out the strike clause, because they were not going to leave sick people. The Union did not believe in leaving the sick untended. Very far from that; if any member of the Union chose to adopt such a course her membership of the Union would probably be at once cancelled. They were going to try to get what they wanted by other methods, and leave out the strike altogether. They wanted to get, first of all, a fair living wage for a fair and competent service. They were also out to try, through their organisation, to enable nurses to provide for their old age and their sickness, and as one of the means to this end they had already set apart in one of the London hospitals six beds which could be used for nurses until the Union could make better arrangements for them. They looked forward to the time when they would have a nurses' club, with living accommodation, recreation rooms, and entertainments. There was no doubt that nurses met with serious injustice sometimes, and such grievances would be investigated by the Union.

Miss Parsons was thanked for her address by the meeting, on the motion of the Chairman.

## HOW MUCH WOULD YOU CALL A PART?

The dispenser was rather exhausted; the out-patients had been more than usually trying. One had produced a pint bottle for eye drops; another was annoyed that she had only four items prescribed. "Ain't 'e put down that brown medicine, Miss?" It had been difficult to drive into the mother with four children that the ointment for Tommy's ringworm was *not* suitable for the baby's eye, and that she must either produce another receptacle or a penny for one provided by the hospital.

Thanks be, the evening is nearly finished. The last patient puts his bottle through the hatch. "Mix this lotion with four parts of water."

"Very good, Miss."

The footsteps which had retreated down the staircase are heard returning, the head reappears at the hatch. "Please, Miss, 'ow much would you call a part? Would a egg-cup be a part?"

A public health nurse of the Manitoba Provincial Board of Health has been appointed to do work in connection with the Venereal Disease Clinic of the Winnipeg General Hospital in conjunction with the Social Service Department.

## INTERNATIONAL NEWS.

Members of the International Council of Nurses will be pleased to hear good news of M. André Mesureur, the Sous-Directeur of the Administration Générale de l'Assistance Publique à Paris, as we can never forget the extreme kindness and courtesy with which both he and his father, the Directeur, received the Council in 1907.

M. André Mesureur has a most patriotic record during the war, and we are indeed delighted to hear that he came safely through all its vicissitudes, and is again in Paris head of the Assistance Publique Staff, with 23,000 persons, including doctors and nurses, under his amiable direction.

We hear from M. André "I was one of those who resolved to apply the eight-hours' system to nursing, and as it is now it gives satisfaction to the staff, ensuring to them the necessary hygiene, whilst the patients receive the same care and attention as formerly, awaiting the improvements we are preparing, thanks to our School of Nurses at the Salpêtrière. Unfortunately we are unable to cope with the demand for nurses; it has been necessary to found 2,500 new berths, of which 1,000 are for nurses, whereas the school can only supply from sixty to seventy-five certificated nurses a year. But I have applied to the military nurses, and have found among the latter well instructed and ladylike women.

"I am thinking about sending my pupils to London. I intend to try and resume, in the near future, this custom, for which I care a great deal. . . . I will not broach the subject of the splendid work accomplished by British women in France, it is too well known, and everyone renders them homage.

"As soon as I recommenced my work I started reading THE BRITISH JOURNAL OF NURSING regularly every week, with the greatest interest."

A compliment greatly appreciated by the editors, both of whom are deeply interested in the progress of nursing in France.

## DEMOBILISATION OF WAR NURSES.

The Army Council has given instructions that members of Q.A.I.M.N.S. Reserve and the T.F.N.S., V.A.D. nursing members, and special military probationers, who are permanently unfit for further service by reason of disability, whether due to military service or not, will be demobilised forthwith. Those temporarily unfit by reason of disability caused by military service will be demobilised as soon as they complete twelve months' absence from duty on account of medical unfitness, or cease to require indoor hospital treatment, whichever happens first.

## NURSING ECONOMICS.

The Hospital Boards in the Dominion of New Zealand have been notified that the Department of Public Health and Hospitals proposes, before next Session, to discuss among other matters a colonial scale of salaries and a superannuation scheme for probationers, nurses, and Matrons, so as to place the nursing staffs of hospitals on a better footing. The Department has prepared the following scale of salaries and circularised the Hospital Boards, many of which had requested a scheme to be suggested for their guidance:—

## SUGGESTED SCALE OF SALARIES FOR NURSING STAFFS OF HOSPITAL TRAINING SCHOOLS.

## Daily Average of Occupied Beds.

	300 to 500	150 to 300	60 to 150	60 and under
	£	£	£	£
Matron .. .. .	250 to 350	200 to 250	175 to 225	150 to 200
Sub-Matron .. .. .	150 to 200	130 to 150	110 to 140	
Night Charge Sister .. .. .	125 to 175	120 to 140	110 to 120	
Home Sister .. .. .	125 to 175	120 to 140	110 to 120	
Theatre Sister .. .. .	125 to 175	120 to 140	110 to 120	
Sister of Special Department .. .. .	120 to 150			
Ward Sister .. .. .	100 to 120			
Registered Staff Nurses .. .. .	75 to 90	75 to 90		
Probationers: 1st year .. .. .	25	25	25	25
2nd year .. .. .	35	35	35	35
3rd year .. .. .	45	45	45	45
Sub-Matron outside Institutions .. .. .	150 to 200	150 to 200		
District Nurses .. .. .	*180 to 250			
Registered general—midwifery .. .. .				
District Midwives .. .. .	*170 to 230			
Assistants (unqualified) .. .. .	*80 to 100			

\* Cottage or rooms provided, but living expenses met out of salary.

## SHORTAGE OF NURSES IN AMERICA.

The Presidential Address of Miss Clara D. Noyes, R.N., President American Nurses' Association, given at Atlanta, after touching on the great progress in various directions, states that it is roughly estimated that 100,000 nurses have registered in order to conform to the nurse practice (registration) acts which exist in forty-six States, that there are about 3,000 schools of nursing from which probably 13,000 student nurses are graduated each year, and for which superintendents and instructors are required. Miss Noyes then refers to the great funds raised by nurses themselves for financing the propaganda for Rank for Nurses, which through their efforts became part of the Reorganisation Bill of the Army, large scholarships and loan funds have been placed within the reach of nurses desirous of preparing for public health nursing and as instructors in nursing schools, associations of nurses have raised great funds for the relief of disabled members—and to build a school of nursing in France (at Bordeaux) as a memorial to those nurses who gave their lives during the War—a very fine record of self-support. Miss Noyes adds: "We find our periodicals well established and our literature increasing." Hearty congratulations on this record. No profession can rise unless it controls its own press. But still all is not well with nursing even under the Commune system in the States.

Necessarily some unrest prevails. The nurses who went into active service, an army 20,000 strong, have come back from overseas or from military hospitals in this country, or from naval stations to which they were assigned, with a new point of view; some dissatisfied, it is true, some exalted by a broader and wider insight into the wonderful possibilities lying within their grasp; some physically unfit for nursing, but equal to some other form of work, ready and eligible for the re-education which the Government offers; others—and, alas! there are too many—held in the grasp of that dread disease, tuberculosis, for whom arrangements for care under proper conditions are being developed as rapidly as possible by Federal departments.

Miss Noyes called attention to a great scarcity of graduate nurses, and asks 'where are they all?' Estimating rather roughly, 15,000 released from active service, add to this the graduates of 1919, of probably 13,000 pupils, we should have at least 28,000 more nurses available for service than we had a year ago. What has become of them? From such information as can be secured, many seem to be leaving the profession entirely, many enter the business field which at present is offering lucrative positions and alluring possibilities; many are establishing homes for themselves in the country or are taking up land grants; as secretaries they seem to excel, while matrimony and tearooms beguile many from the ranks of active workers. We also find many, not leaving for something quite different, but entering related fields of activity, such as social service, anesthesia, X-ray, and

laboratory technique; more recently our attention has been called to the fact that many are entering the field of oral hygiene. We are naturally concerned by these deflections from the straight path of nursing, for every one turning aside for what may seem a more attractive opportunity weakens our strength and scatters our power for usefulness. The unrest is not confined to nurses, it is noticeable in other professions as well.

"The exodus from our own ranks, however, is our problem, and is a genuine cause for alarm. We should like to see a definite campaign of education of the public to their responsibility in this direction undertaken. The importance and value of a nurse's education, her place in the economic and social scheme, proper schools, separate endowments, should be more generally and better understood. A different attitude should be developed toward the nurse. For example, at one moment she is declared by leading medical authorities the most important factor in our public health movement; at the next she is discredited, her work is belittled, she is deprived many times of an opportunity for initiative. . . . Can any profession grow and thrive under conditions as they now too frequently exist? Is a nurse necessary in the field as a public health worker or in the institution? Is she an important adjunct to the medical profession or is she not? If she is, then what can be done to interest her to enter the profession and keep her there after she has once entered? What can we do about it all? Isn't this one of the questions that we, as nurses, must try to answer? If it seems necessary to retrace our steps and begin all over, then we must begin the education of a nurse back in the public consciousness. There seems little use of urging young women to enter schools of nursing, if, because of conditions within, it becomes impossible for them to remain after they have entered. Every pupil that does withdraw is a propagandist against the system. Nurses cannot alone support or endow good schools. They need, as does every profession, the public back of them. They require the sympathetic understanding of the medical profession, they also require the support of an intelligent and educated public, at the same time they need to educate themselves to a wider comprehension of their own responsibilities toward the profession they represent and to the public they serve. We hear quite generally that commercialism is invading the ranks of nurses and some rather distressing stories are being told of excessive charges and of arbitrary and un-nurselike attitudes.

"Perhaps this is what one might expect as a natural reaction to years of servitude and it is at least in keeping with the times.

"While it is true that 'Every labourer is worthy of his hire,' we believe that we must still continue to make a few sacrifices, we are still pioneers and we should count it still a glorious honour to keep the lamp, lighted by Florence Nightingale so many years ago, trimmed and filled and always burning, we cannot allow it even to dim lest we lose the priceless position that we have gained in the world's work."

## QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES.

Her Majesty Queen Alexandra has been graciously pleased to approve the appointment of the following to be Queen's Nurses, to date July 1st, 1920 :—

### ENGLAND.

Misses A. James, C. M. Billingham, H. M. Hall, L. Hirst, M. D. Hughesdon, E. Weaver, R. Down, E. M. Ashwell, M. E. Botsford, M. Emms, J. I. Jackson, E. L. Yeates, E. Parker, A. H. Allan, W. A. Markland, E. Hendley, L. Robinson, M. K. Reid, G. Barrett, G. M. Knight, E. E. Lacey, E. Bull, M. D. Stewart, I. M. Kirk, R. E. Towse, L. Turton, E. M. Brown, J. Kelleher, F. Dodds, M. M. Donald, M. Clarkson, L. M. Crosby, H. M. Lewis, M. Rigby, M. I. McQuhae, E. Rushton, C. Noble, M. E. Norris, F. E. Giles, J. Colvill, E. Partington, M. C. Thomson, M. Sullivan, C. Wilton, F. E. Bignell, F. A. Everett, S. M. Foreman, C. M. Slack, E. A. Slack, L. M. Robins, H. Yates, E. Gammon, H. A. Green, G. A. Inston.

### WALES.

Misses E. A. Hughes, P. Rogers, M. F. A. Stevens, M. Williams, S. C. Elias.

### SCOTLAND.

Misses E. I. Alexander, S. R. Angus, E. Bayne, M. Bremner, J. Griffin, A. Hayes, E. Kay, I. F. King, C. I. Macgillivray, G. Marshall, A. E. Thomson, F. V. Webster, M. R. Wilson, K. Wrench, J. Mitchell, T. Melville, R. R. Sharp, M. A. Cooper, J. M. Valentine, J. C. Jeffrey, M. A. Parker, C. B. Wilson, I. Diack, H. S. Headridge, M. Y. Maule, M. Pierce.

### IRELAND.

Misses N. M. Coffey, M. T. O'Neill, H. B. Roche, K. S. E. Dudley, M. A. Weir.

## TRANSFERS AND APPOINTMENTS.

Miss Jane Brazendale is appointed to Newport Home, Shropshire, N.F. as Superintendent; Miss Jessie C. Bath to Northants, D.N.A., as an Assistant County Superintendent; Miss Annie M. Payne to Plaistow N.A. (Docks Branch), as Assistant Superintendent; Miss Winifred M. Brennan to Bentley with Arksey; Miss Margaret M. Cotter to New Mills; Miss Mary Crosse to Frome; Miss Florence Dronfield to Newton Heath; Miss Mary F. Ronchetti to Frome; Miss Lilian Whitton to King's Lynn.

## JOY BELLS.

On August 5th at 28A, Leinster Terrace, Hyde Park, W., to Mr. and Mrs. Teasdale Birks, a daughter (Joan Mary).

Many of her colleagues will wish to convey their congratulations to Mrs. Birks (*née* Branch) formerly a member of the Registered Nurses' Society, 431, Oxford St., London, W. As a member of the French Flag Nursing Corps she also did good service in French Military Hospitals where her work was greatly appreciated, and she had many grateful patients amongst the sick and wounded poilus.

## THE PASSING BELL.

We greatly regret to record the death at the London Hospital, after an operation, of Sister Eva Magdalene Richards, Sister of Watts Ward at St. Bartholomew's Hospital, Rochester.

## NURSING IN PARLIAMENT.

### PROBATIONER NURSES (CONDITIONS OF WORK).

In the House of Commons on August 9th, Viscountess Astor asked the Minister of Health whether his attention has been drawn to the conditions under which nursing probationers in many London hospitals at present work, especially with regard to housing accommodation and hours and conditions of duty; and whether he will consider recommending reforms in these connections to all hospitals in receipt of State grants for the benefit both of probationers and of the nursing profession generally.

Dr. Addison replied in a written answer: I am fully aware of the unsatisfactory conditions under which many probationer nurses are at present employed and any steps which the General Nursing Council may propose to remedy this state of affairs will have my sympathetic consideration. State grants, however, are only paid in respect of the treatment of certain specified diseases, and I do not think it would be practicable to attach to them conditions such as the Hon. Member suggests.

## APPOINTMENTS.

### MATRON.

**Minehead and District Hospital.**—Miss Ethel Dowson has been appointed Matron. She was trained at the Royal Infirmary, Bradford, and has been Sister at St. Bartholomew's Hospital, Rochester, and Assistant Matron and Home Sister at the Warneford, Leamington, and South Warwickshire Hospital, Leamington.

### SISTER.

**Royal Infirmary, Halifax.**—Miss C. G. Uttley has been appointed Sister. She was trained at St. Luke's Hospital, Halifax, and did Military nursing at home during the war. She has also been staff nurse at the General Infirmary, Leeds.

**Township Infirmary, Leeds.**—Miss Elizabeth Neeson has been appointed Sister. She was trained at the Union Infirmary, Belfast, and has been Sister at the Royal National Hospital for Consumption, Newcastle, Ireland, and worked as a member of the Territorial Force Nursing Service at the 2nd Northern General Hospital, Leeds. She has also experience of private nursing.

**Maternity Hospital, Swansea.**—Miss Florence M. Julian has been appointed Sister. She was trained at Cardiff Union Hospital and has been Staff Nurse at Mountain Ash Hospital, Nurse-in-Charge, Taunton Union, District Midwife at Tredegar, and Sister at Bellshill Maternity and Child Welfare Hospital.

### TUBERCULOSIS NURSE.

**County Borough of Barnsley.**—Miss Mary Ridgway has been appointed Tuberculosis Nurse. She was trained at the Crumpsall Infirmary, Manchester, and has held the position of Sister under the Metropolitan Asylums Board, and has had experience of District Nursing and Health Visiting at Barnsley.

### HEALTH VISITOR.

**County Borough, Southend-on-Sea.**—Mrs. Isabel M. Munro has been appointed Health Visitor. She was trained at the Royal Sussex County Hospital, Brighton, and has been staff midwife at the Southampton Municipal Maternity Centre.

## HONOURS FOR NURSES.

### AFGHAN OPERATIONS.

#### THE ROYAL RED CROSS.

The King has awarded the Royal Red Cross on the recommendation of the Government of India to the following ladies in recognition of their valuable nursing services in the field in the Afghan War, 1919. To be dated January 1st, 1920 :—

#### THE ROYAL RED CROSS. SECOND CLASS.

Miss E. E. Bott, Nursing Sister, Q.A.M.N.S.I.; Miss F. B. Cholmondeley, Matron, Q.A.M.N.S.I. (temp.) Miss F. M. Clarke, Nursing Sister, Q.A.M.N.S.I. (temp.) Miss A. Holmes, Matron, Temp. Nursing Service. *Australian Army Nursing Service.*—Miss A. Hodson, Sister.

In recognition of their valuable nursing services in connection with the Afghan War, 1919. To be dated January 1st, 1920 :—

#### THE ROYAL RED CROSS. FIRST CLASS.

*Australian Army Nursing Service.*—Miss G. Davis, Principal Matron.

#### SECOND CLASS.

Miss C. Duncan, Matron, Indian Gen. Hosp.; Miss M. Wardell, Nursing Sister, Q.A.M.N.S.I. *Australian Army Nursing Service.*—Miss L. Campbell, Matron; Miss W. A. C. Gilliland, Sister.

### GENERAL MONRO'S LIST OF MENTIONS.

The names of the following ladies have been brought to notice for distinguished service during the operations against Afghanistan by General Sir C. C. Monro, G.C.B., G.C.S.I., G.C.M.G., in his despatch dated November 1st, 1919 (published in the Supplement of the *London Gazette* dated March 15th) :—

#### NURSING SERVICES.

Gilmore, Sen. Nursing Sister A. M., R.R.C., Q.A.M.N.S.I. Lamb, Sen. Nursing Sister Miss V. I., R.R.C., Q.A.M.N.S.I.; Mackintosh, Temp. Nursing Sister Miss M.; McGowan, Sen. Nursing Sister Miss C. S., R.R.C., Q.A.M.N.S.I.; O'Sullivan, Temp. Nursing Sister Miss E.; Rabbidge, Nursing Sister Miss M. D. Q.A.M.N.S.I.; Higgins, Temp. Nurse Miss A., St. John's Amb.; Scanlan, Nursing Sister (temp.) D. M. Q.A.M.N.S.I.; St. Martin, Nursing Sister (temp.) K., Q.A.M.N.S.I.

## A HOLIDAY HINT FOR THE SIMPLE HEARTED.

For your holiday you go to the East Coast where you seem to have the monopoly of fine weather. Perhaps it might be warmer at times, but on the whole you manage to be comfortable in your summer clothes.

Your particular little fishing village has many attractions. Glorious sea, blue and clear, with sands stretching for miles. *Such* bathing! When your sea toilet has been made in your own particular little hut, which you have rented for your stay, you stroll down the sands in a jaunty and sketchy costume in which you certainly would not venture to appear in public under any other conditions, and we guarantee that your nearest and dearest would not recognise you if they met you unexpectedly. For a moment you stand

shivering on the brink before the plunge, and then—well, life does not hold anything comparable to a swim and buffet with the waves. If there is any sun to bask in, you then bask therein, having, of course, previously clad yourself again in conventional clothing, and having disposed of your tights to dry on the bank. Or you race down to see the fishing boats come in, and secure a lobster straight from the sea. You watch the fishermen measuring the crabs and flinging the lucky immature back into the sea for a further lease of life. At lunch time you wander back to your rooms, gingerly carrying your lobster, who has an alarming way of flapping his tail in angry protest.

In the afternoon you wander along by lovely woods, accompanied by a donkey and little cart, which you ride in when the hills are not too steep, up or down, for the donkey does not like either. It is a delightful conveyance, if the harness is tied up with bits of string, and if the reins are joined with a jagged nail that tears your fingers.

Jimmy has a habit of stopping to graze when he observes a toothsome nettle or a succulent patch of clover, but who would have the heart to object, bless him! And he has much to set off against this treat, in the weight of your person and what appears to be a plague of flies.

To relieve the first you walk a great deal, and for the second you decorate his head with branches of bracken.

It is pleasant to sit by the wayside and have your tea brought out from a lonely cottage with an obliging house mistress, Jimmy meanwhile regaling himself with carrots.

Your return is heralded by red-haired and picturesque, albeit squinting, little Emily, who informs her mother of your return and, incidentally, the donkey's. You drive in state across the common and yield up Jimmy to his lawful owner. Mrs. Tuck pays you the compliment of considering that you are "rough and ready, like her." You should see Mrs. Tuck!

After so much carriage exercise you are glad to saunter down the village, and you must certainly not forget to waive to old Granny of 94, whose only recreation is to watch the passers-by from her bed. You finish the day, after you have consumed your lobster, by watching the lovely sunset over the sea from a deck chair on the sands.

When its last glow has disappeared, you fasten up your hut for the night, and say to yourself, in imitation of your East End friends, "Nothing to grumble at."

## THE HOSPITAL SUNDAY FUND.

At the meeting of the Council of the Metropolitan Hospital Sunday Fund, held at the Mansion House last week, Mr. R. Holland Martin, who presided, announced they had secured £110,000, £25,000 more than in 1918, when a record was created by the collection of £85,000.



## THE HOSPITAL WORLD.

St. Pancras Guardians have decided that their North Infirmary shall be designated "Highgate Hospital," and the South Infirmary "St. Pancras Hospital."

Viscount Powerscourt, presiding at a public meeting in the R.D.S. Theatre in Dublin to inaugurate a fund to meet the immediate needs of the clinical hospitals in the city, said nothing had ever been done in Dublin on such a scale as the gigantic scheme to raise £100,000 to pay off all the debts on practically all these institutions. He had accepted the position of president because he knew he would have the support of the general public, and he and his committee had not the slightest doubt that they would reach the ultimate goal.

It was proposed to hold a great Fête at Ballsbridge in October. That would be their great advertisement. Their council he explained would consist of four representatives of each of the hospitals, four of the Corporation, four of the different churches, four of Labour, and four discharged soldiers.

There was a consensus of opinion expressed that the great work done by the hospitals was deserving of the whole-hearted support of the community.

Dublin is very proud of its hospitals, and we have no doubt will secure sufficient financial support to continue their fine work for humanity.

The Hertford British Hospital in Paris is in great need of funds. It is a very beautiful little place which the British Colony in Paris should make a point of supporting.

## WHERE TO GET BOOKS.

The firm of W. & G. Foyle, the well-known booksellers of Charing Cross Road, has been converted into a Limited Company, with Messrs. W. A. Foyle and G. S. Foyle, the original partners, as Directors. By this conversion the firm hope to extend their business, and to give the public the finest book service based on organisation and system.

The history and progress of this world-wide concern has been phenomenal. Twelve years ago the brothers Foyle started operations with a few shorthand books in a soap box in a London suburb; now they have a stock of over 1,000,000 volumes, classified and arranged, with an expert in each department.

## NAMES AND ADDRESSES TO NOTE AND REMEMBER.

MESSRS. BURROUGHS, WELLCOME & CO., Snow Hill, London.—The drugs supplied by this firm in tabloid form are a household word. We commend to the attention of our readers their "Laxamel," a valuable jelly like laxative containing 80 per cent. of "Paroleine," a specially pure liquid paraffin for intestinal lubrication.

## THE CONGRESS OF THE ROYAL SANITARY INSTITUTE.

### POINTS IN THE SPEECHES.

A number of interesting points were raised in the speeches and papers at the Congress of the Royal Sanitary Institute at Birmingham last month.

### THE FIRST PROBLEMS OF PEACE.

Alderman W. A. Cadbury, the Lord Mayor of Birmingham, in proposing the toast of the Royal Sanitary Institute at the Public Luncheon, said that there was still a great deal to be done before they reached an ideal public health service. Health and sanitary science were accepted as the first problems of peace, and the Ministry of Health was determined we should start on an entirely new and progressive programme with the principle of the prevention of disease in the forefront. Public health to-day was the affair of every responsible citizen, and they would have to consider if it was not one of their essential public services.

### THE ADVANCE IN PUBLIC SANITATION.

Lord Astor, in his inaugural address, said that his audience would perhaps be asking themselves why with the great advance in public sanitation they were still so far from a healthy nation. He thought one answer might be found in the immense crowding together of individuals which was part of modern civilisation. In trams, in trains, in omnibuses, even in the streets of the cities, men and women were constantly in contact with their fellows. Whether at work or at play the isolation of the individual was almost a thing of the past. The daily, hourly contact of individuals presented comparatively new problems affecting modern health for which as a nation we had to find the solution. Thus we needed to bring home to the people that dirty, diseased, or bad food was expensive, and pure food cheap by comparison.

### NEW FIELDS OF ENDEAVOUR.

The free entry of women into new fields of endeavour created fresh health problems, and might diminish some old ones. We might expect less nervous disease due to thwarted energies and sterile faculties, and consequently fewer idle people troubling doctors with imaginary complaints; but overstrain and the effect of mental and physical effort upon maternity would need careful observation. Some people were inclined to think that greater freedom was tending towards increased licence in sex relationship. He did not believe that greater freedom would lower moral standard in either sex; rather, he hoped that the greater sense of individual responsibility would raise it. Greater freedom implied greater responsibility upon the individual, and the nation's need at the moment was for a development of the social conscience in the individual. The diseases of to-day had become less community diseases and more contact diseases; the efforts of public health

workers must therefore be concentrated on creating in the individual the same sense of responsibility for personal health as existed in the community for communal service. The Ministry of Health was a co-ordination of departments; it was not and never should become a bureaucratic organisation forcing upon an unwilling people hospitals and clinics, doctors and nurses.

#### RACIAL ADAPTATION.

Dr. F. G. Crookshank maintained, in regard to influenza, that if we profit by experience, and keep the memory of previous epidemics in mind, we shall be able ultimately to forecast the coming storm when it first appears on the horizon a cloud no bigger than a man's hand. A pandemic of influenza appeared to be a co-ordinated series of happenings—in which individuals and particular sets of circumstances played their part, but was ultimately caused by forces or agencies, widely affecting the whole set of conditions of life upon this planet. Why was it, that at such irregular but definite intervals as to be almost predictable (like the return of a comet) by mathematical calculation, there should be such a repetition of similar and widespread disorders of health if there be not in the background some general factor, telluric or cosmic, involving periodic variation in the conditions of all forms of life—human, animal, vegetable, and even microbic? There appeared to be every hope that investigation on the lines of historical, philosophical, and epidemiological enquiry would enable such measures to be concerted as would fortify the world populations against the coming of the catastrophes, and such measures as will enable these populations best to help themselves in the face of actual danger. Long and broad views must be taken, and if this were done the experience of one generation would not be forfeited by the next but would be handed down, a rich legacy of increasing capacity for racial adaptation for the benefit of those who came after us.

#### PERSONAL AND DOMESTIC HYGIENE.

Mrs. George Cadbury, who presided over the section of personal and domestic hygiene, referred to the testimony to the practical value of the work which is being done in the schools from a medical man who recently told the Birmingham Hygiene Committee that in the examination as certifying surgeon under the Factory Act of a number of boys and girls who had just left school, he had been much struck, he said, by the improved physique and general well-being of these children. He believed that we were beginning to reap the reward of medical and dental supervision.

Referring to the housing question, Mrs. Cadbury asked: "Can people living in a back-to-back house or a sunless alley possess any power of initiative, or will to improve? Yet even in such places there are wonderful women, who rise above their surroundings and exercise imagination and powers of organisation. When I see a group of tidy children, clean, brushed and fed, coming forth from such surroundings, I bow in admiration before the Madonna of the slum."

## PROFESSIONAL REVIEW.

### POPULAR CHEMICAL DICTIONARY.\*

We have pleasure in bringing to the notice of the authorities of nurse-training schools as well as of individual nurses the "Popular Chemical Dictionary," by Mr. C. T. Kingzett, F.I.C., F.C.S., author of "Chemistry for Beginners, and School Use."

The book should be included in all reference libraries for nurses, for it fills a place hitherto unfilled, and within the limits of a single volume gives in simple language concise and up-to-date accounts of the subject of chemistry, the laws and processes, the chemical elements, the more important and organic substances and the methods of their preparation and manufacture. These are subjects of which nurses know little, but with which, in the practice of their profession, it is very desirable that they should be acquainted, hence the value to them of a book of reference which can readily be consulted.

Subjoined are some examples of the information which may be obtained on consulting the book:—

**Amalgams.**—The name given to any combination of other metals with mercury. Gold and lead, for example, are somewhat easily dissolved by liquid mercury in varying proportions; such combinations, however, are probably not definite chemical compounds, but mere mixtures. The potassium and sodium amalgams decompose water, giving off hydrogen, and are frequently used as reducing agents. Amalgams of gold and copper are used by dentists as stoppings for teeth.

**Cloves.**—The undeveloped flower buds of the clove tree (*Eugenia caryophyllata*) used as a spice. The essential oil of clove is obtained by distillation of the buds and flower stalks with water. It is a pungent smelling liquid, containing from 85 to 90 per cent. of eugenol ( $C_{10}H_{12}O_2$ ) and a small quantity of a terpene isomeric with turpentine.

**Dry Rot.**—A chemical decomposition of wood or changes of composition induced by the agency of fungi (especially *Polyporous hybridus*, and *Thelaphora puteana*) and other causes; the proportion of carbon and hydrogen contained in the wood being reduced by the production of carbon dioxide and water. In other words, it is an act of slow oxidation accompanied by a loss of density of the wood until the latter, as in the case of hollow tree trunks, becomes rotten.

**Osmosis.**—The mixing of two liquids separated by a porous diaphragm; for instance, if a bladder containing alcohol be placed in a basin of water, some of the spirit will pass through the diaphragm into the water, and some of the water will pass through it into the alcohol.

It will be realised that the book contains a fund of useful information, which is very attractively presented, and its value is increased by the excellent and numerous illustrations.

\* Baillière, Tindall & Cox, 8, Henrietta Street, Covent Garden, W.C. 2 Price 15s.



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

*Boots*  
Chemists

**355 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## BOOK OF THE WEEK.

## "DAISY ASHFORD: HER BOOK."\*

Emboldened by the success of "The Young Visitors," Miss Ashford brings more treasures out of the storehouse of her youth, and delights us with this new revelation of her childish genius.

The volume is comprised of short stories, and the first entitled "A Short Story of Love and Marriage," was written at the age of eight years and dictated to her father, who faithfully took it down word for word. By this process something is lost, both in the accurate spelling and in the paraphrasing, which, in "The Young Visitors," was original in the extreme; but Daisy's flights of imagination are quite as convincing.

The meeting between Thomas Hendrick (known as Burke) with his true love, Edith Plush, was as follows:—

When he reached Mionge Lane he met his pretty true love skipping along most lady-like and primly. In one hand she carried a Leghorn hat with red and blue ribbon, in the other a silken bag filled with a threepenny bit and two biscuits, and her age was nineteen.

"Well, my pretty bird," she said, as she approached Burke (who, by the way, had a greasy head), "I hope you will like to 'manger' a biscuit with me." I may add she was fond of French. A disagreement which arose on Burke's preferring cracknells, when Edith had provided Osbornes, ended with:

"Well, dry up those moist tears and I will eat one," said Burke. Their short courtship ended in a wedding, when the timid darling lady wore a remarkable costume with a high bustle, her white veil reached down to the top of her stays. White kid gloves, and as the sleeves of her dress were rather short her red, beef-coloured hands showed between. Pretty white velvet boots with grass-green buttons and washed-out red stockings completed her attire. The "strong and bold bridegroom" was similarly unsuitably dressed, and when he arrived at church his bare legs were not much appreciated.

For their honeymoon they went to the south of India and seven hours after they got there they had two twin babies, a boy and a girl, which they called Abraham and Sarah because they were fond of those holy saints.

"Where Love Lies Deepest" was written at the age of twelve and dedicated to her governess.

Beatrice of surpassing loveliness was not sufficiently enamoured of Laurence Cathcart to become engaged to him. She was poor and he was rich and there was an element of pride in her refusal. Laurence urges her to say "Yes," and live in luxury and riches for the rest of her life.

Beatrice soon forgets her woes in an invitation she receives to pay a visit in Paris. Her father consents, and "I suppose," said he, "You would like a pound or two to buy dresses and hats;

I will give you £10; I should advise a blue serge and a yellow hat."

This advice was scouted and the £10 in ready gold from Mr. Langton's scanty purse was invested in a lovely green silk dress trimmed with a delicate shade of rose-pink, and the dainty little hat was of the same picturesque colours. She likewise bought a costly diamond brooch and two silver bangles to make up the £10.

After many vicissitudes Beatrice is accepted as a military hospital nurse and receives a letter from Captain Harsh offering her a post in India, where she can live with other nurses in a comfortable house not far from the battlefield. Here she has a poignant scene with Laurence Cathcart on his death bed.

"The Hangman's Daughter," which was written when Daisy was thirteen, is quite a long and ambitious affair. Mr. Winston accepted the office of hangman at Kenalham, in spite of his nerves being bad, as the payment was good; and, after all, only about two people were hung in the year there.

"The Jealous Governess," written by Daisy's sister at the age of eight, is acknowledged by Daisy herself to be the most amusing in the collection, and we agree with her.

Mr. Hose and his wife were desirous of having a baby of their own.

"I should like to adopt one," said Charlie; "I would like to have one of my own," said Elizabeth; "I don't like adopting babies." However, early the next morning, the doctor arrived with a box under his arm. "Oh! I say, Mrs. Hose," he began, taking off his hat; "I have heard you have been wishing for a baby, so I have brought you one."

"Oh! hurrah," said Mrs. Hose; "Is it a boy or a girl?"

"Well, I don't know," said the doctor, "quite; but I'll leave you to find out and settle matters."

Directly the box was opened a dear little fat baby rolled out on to the eiderdown.

A governess was engaged for this treasure when it was six months' old, in order that it might get used to her before it was time to be taught.

But the tragedy lay in the governess herself wishing to possess a like treasure and having bargained in a distinctly original way with Mrs. Hose's doctor, she receives in due course a similar box from him.

"I hope it's nice," she said, as she cut the string.

Of course it was ugly, as most babies are when they are first born.

But this would not do for Miss Tunick, for she called it "an ugly little beast," and next day she threw it away.

"She was now quite satisfied that she had got rid of it, but she was more angry still when she found the bill inside the box: "Miss Tunick, dr. to Doctor Paulin for one baby delivered as per agreement, £1."

We have no space for comment, but promise our readers many a laugh if they obtain and read the book.

H. H.

\* By Daisy Ashford. (Chatto & Windus.)

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE GENERAL NURSING COUNCIL.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I read with deep interest the report of the meeting of the General Nursing Council published in your last issue. It is good to know that henceforth we may expect to find its proceedings reported in the JOURNAL. I hope, before long, to read that the Council is ready to receive applications for registration and so the aspirations of over a quarter of a century will find fulfilment. If I can gauge nursing feeling accurately, and I believe I can, thousands of nurses will rally to the standard once the word is spoken. It will be a joyful day.—Yours faithfully,

A LIFE-LONG REGISTRATIONIST.

## THE SHORTAGE OF NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—The shortage of nurses at the present time can be traced to various causes, but the main cause is probably the economic and social disadvantages under which nurses are placed. The economic disadvantages affect a large number of suitable candidates. (a) There are many occupations suitable for women which do not demand either the mental concentration or the bodily energy which is essential in the training of a nurse. (b) The salaries earned in such occupations are often considerably larger than are the salaries of nurses working in hospital or on district work. (c) The hours of duty are considerably longer for nurses than they are for women in other occupations and professions.

The social conditions deter many women who would, if trained, make excellent nurses. During the period of training a nurse has very little opportunity for meeting people outside her own profession. There are two reasons for this: (a) The hours on duty are such that it is difficult to visit unless she has intimate friends near. (b) There is no opportunity to return hospitality unless the medium of the restaurant is adopted, and the salary of a nurse will not allow of frequent restaurant entertaining. The nurse is thus often debarred not only from the joys of home life, but even from social intercourse, as are women in no other profession.

The hours during which a nurse is expected to be on duty—and not to show signs of fatigue—are often sufficient to break the spirit of the most ardent. An average duty of 68 to 70 hours per week, with studies and lectures to fill in the off-duty time, does not allow much leisure for visiting or recreation, and very often the end of the working day finds the nurse too tired to change from uniform into mufti. So much for the disadvantages under which the nurse labours.

In some institutions a 48-hour week has been

arranged, and consequently an increase of staff is necessary. Thus a bigger demand is created.

The aftermath of war—the maimed, the lame, the blind and the mentally afflicted—all call for an increase to the ranks of nurses.

The civilian population has also suffered mentally and physically, during the past six years, and here again we find an increasing demand for trained and skilful nurses.

Public Health Work, School Nursing, Infant Welfare and Maternity Centres are calling week by week for trained nurses, and gradually the public are realising the importance of a nurse's work in preventing the spread of disease and in building up the physique of the new generation. The demand will, therefore, be increased, rather than lessened, in the near future.

If women of the right calibre are to be attracted to the Nursing Profession, it is necessary that the economic, social and physical conditions of a nurse's life should be considerably improved and that speedily.

There is, however, one other factor which, perhaps, is partly outside our sphere of influence. The tendency of the present day is to seek after pleasure. A nurse's life will always demand a certain amount of self-sacrifice, and until our girls have been taught that life demands giving as well as receiving, there will be a shortage of nurses. Certainly the more one gives, the more is demanded but if giving was mutual, instead of a few giving of their best, until they were physical wrecks, we should have advanced considerably towards the solving of even larger problems than the shortage of nurses.

M. DUGDALE.

## KERNELS FROM CORRESPONDENCE.

Miss M. L. Hunter, *Matron Special Hospital for Officers, Palace Green, Kensington*.—"I should like to point out that the appeal recently published in several newspapers *re* dainties for shell-shocked patients in this hospital was quite unauthorised, no one in authority in connection with this hospital having made any such appeal."

Miss H. K.—"Enclosed is a cutting from one of our last week's local papers. The woman referred to is typical of many of the private nurses who carry on here. (The cutting is a letter from a lady who engaged a nurse at 2½ guineas a week on presentation of her card, inscribed "Nurse —, Certified Nurse. London diploma," only to find later that she was a monthly nurse who had never had any hospital training.—ED.) These so-called nurses proudly say, 'I nursed him till he died,' not realising that had they left the patient alone he might not have died. Our only hope is that the Rules to be framed by the General Nursing Council will in time rectify these evils."

## OUR PRIZE COMPETITION.

August 14th.—What are the principal causes of malnutrition in the school child, and what are its effects?

August 21st.—What special points should be observed in caring for (a) the blind; (b) the deaf?

# The Midwife.

## LYING-IN HOMES UNDER THE JURISDICTION OF THE L.C.C.

It is the intention of the London County Council to apply to Parliament in the Session of 1921 for the amendment of Part IV (Lying-in Homes) of the London County Council (General Powers) Act, 1915, in order to provide that:—

(i) An application for registration of a lying-in home shall state the full name, address, age, nationality and qualifications (if any) of the applicant and such further information as may reasonably be required, as regards the applicant or the premises or their equipment, in connection with the consideration of the application.

(ii) The power to refuse or cancel registration shall be exercisable against a person who is "unsuitable" instead of "of bad character."

(iii) An additional ground for refusal or cancellation of registration shall be that the applicant is under the age of 21 years.

(iv) The Council shall be empowered to make by-laws in respect of lying-in homes for the undermentioned purposes—

- (a) Prescribing the records to be kept.
- (b) Prescribing the number of patients that may be accommodated.
- (c) Prescribing the equipment.
- (d) Providing that all deaths of patients shall be notified to the Council.

The L.C.C. is guided in this action by a Report from its Public Health Committee, which stated that in the course of over four years' experience of the working of the Act the Council has had practical proof of the inadequacy of the existing law, and they therefore proposed amendments for the purpose of securing more satisfactory supervision of lying-in homes, without disturbing the system of registration prescribed by the Act.

The Public Health Committee further informed the Council that they are advised that under the existing law the Council cannot insist on the provision at lying-in homes of obstetrical appliances such as are usually carried by a doctor or midwife; that there is no power to fix the number of patients that may be accommodated in a lying-in home; and that there is no duty on the keeper of a lying-in home to notify the Council of any death occurring there. With regard to notification, it is true that in the case of midwives such a requirement is imposed by the Midwives Acts, but this does not apply in the case of keepers of lying-in homes who are not midwives; and of 237 lying-in homes at present on the London register, the number of keepers who are midwives is approximately 136. If the Council were empowered to make by-laws dealing with certain matters the Committee think that the supervision of lying-in homes would be much improved and the objects

of the existing law more effectually attained. They consider that the power to make by-laws should be limited to specific purposes.

The proposals have been placed before the Chairman of the Central Midwives Board, who has expressed the opinion that they are desirable.

## EDINBURGH ROYAL MATERNITY HOSPITAL.

At the annual meeting of the above hospital, as reported in the *British Medical Journal*, Sir Ludovic Grant referred to the favourable features to be found in a record number of patients and in the firm establishment of the ante-natal clinics as part of the machinery of the hospital; on the other hand he thought that the statistical part of the report afforded food for anxious thought, and emphasized the utter insufficiency and lamentable inadequacy of the hospital in relation to the city at present and still more to the future needs. Major-General W. B. Bannerman expressed his admiration for the work which was being done in the ante-natal department and in that devoted to the care of the venereal diseases complicating childbirth, and stated that in India and in other parts of the world obstetricians looked to Edinburgh Royal Maternity Hospital for guidance in these new developments. They had of recent years begun similar ante-natal work in Madras. The total number of attendances at the ante-natal clinics during 1919 had been 1,414, as compared with 947 in 1918, or an increase of 467. Of the 1,414 cases, 701 were new cases and 713 were revisits.

## A PROBLEM FOR THE VERGER.

The sudden illness of the vicar had dislocated the church arrangements in a manner that was highly disconcerting to the harassed vergers.

Truly, one half the world knows not how the other half lives, and it must be explained that in many a poor parish there is no one but the vicar to appeal to. The regular services had been arranged for, but there remained many traps for the unwary.

The vergers were breathing more freely as the last of the catechism children disappeared, when the door opened to admit two women, both clad in imitation fur coats in spite of the heat of the afternoon.

"Did you want anyone, missis?"

"Yus, I come to be churched."

"Sorry, missis, but Father Jones is took bad, and there ain't no one 'ere this afternoon."

"Well, what am I to do, young man?"

"You'd best go on to St. George's; t'ain't far; and there's someone sure to be there."

"What do you think? I ain't goin' out of this wivout bein' churched; it's that unlucky, and if I did, my old man 'ud bash me."

Truly a problem for the unlucky vergers!



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## EDITORIAL.

### HEALTH LEAGUES FOR SCHOOL CHILDREN.

We doubt not that the most thoughtful among nurses sometimes reflect upon the great benefits which have accrued to our respective countries by our international fellowship in nursing. It is precisely this which has caused such rapid progress. Charles Lamb, in his essay on "The Two Races of Men," brushes aside all distinguishing marks such as colour, manners and customs, and reduces all races to a category of two, namely, the men who borrow, and the men who lend. We see in it a principle readily applicable to the spirit of internationalism. We give and we borrow ideas, a right royal exchange. Here we have in a nutshell the true value of it. As with us, so in the United States of America, and other countries, new methods and new ideas are constantly presenting themselves, and are being acted upon, especially in Public Health Nursing.

We learn from our American sisters of a recent development, to which the attention of our own Public Health Authorities may usefully be drawn. In order to teach the value of self-help in the most practical way possible, in school nursing, there have been formed what are known as Hygiene or Health Leagues, the main feature of which is self-government by the children. Miss Mary Gardner, in her book on Public Health Nursing, tells us that the Health Leagues as organised in New York are proving very effective. Quoting from Dr. Baker, she says: "The fundamental idea is that the children are to be fully responsible for the government and conduct of their League, that its appeal is to their self-respect for themselves, their class, and their school, and that the children, through self-government, are responsible for the cleanliness and health conditions

of all the pupils . . . Each class elects two representatives to a general body; they are designated as Class Leader and Secretary. They meet the nurse once a week for instruction, and to report results obtained during the past week. Each morning the class leader inspects each child in the class to determine conditions of cleanliness with reference to clean clothes, clean face and hands, clean scalp and well-brushed teeth.

"A record of conditions is kept by the class secretary, the teacher acting as arbitrator in case of any dispute. . . The nurse gives frequent talks to the children on personal hygiene in order to stimulate them to help themselves in obtaining health.

"Each class room is provided with a banner or pennant stamped in gold letters Hygiene. The pupils are informed that each class in which cleanliness is strictly observed, and where all physical defects are either under treatment or have been treated, will receive a gold star to be placed on the pennant. In classes showing a certain number of failures to observe proper care, but where the intent to do so is manifest, a silver star is placed on the pennant. For classes where the children seem indifferent and show little, if any, improvement, a black star is given. . . Through the influence of the Leagues, the Nurses' home visits have been reduced, physical defects have received more prompt attention, pediculosis has in some class rooms wholly disappeared, and . . . cleanliness has increased fifty per cent. in schools in which Health Leagues flourish." This effective organisation has been the curative treatment of the ignorance and utter indifference of many of the mothers in carrying out the instructions of the nurses, plus the weak parental control, and subsequent rebelliousness of the children. Reformation through self-help and self-respect—admirable!

## OUR PRIZE COMPETITION.

### WHAT ARE THE PRINCIPAL CAUSES OF MALNUTRITION IN THE SCHOOL CHILD, AND WHAT ARE ITS EFFECTS?

We have pleasure in awarding the prize this week to Miss Ména M. G. Bielby, Cranford, Middlesex.

#### PRIZE PAPER.

"I do not wonder at what people suffer," said Ruskin, "I only wonder at what they lose." Let us be honest on this subject, and admit that before the war the sole cause of malnutrition was crass ignorance—sometimes well-meaning, oftener wilful—on the part of those responsible. Since the war the increasing cost of the necessities of life has made it difficult, sometimes impossible, to provide adequate nourishment, especially as the first essentials—milk, butter and eggs—are now expensive articles, and every child needs a quart of milk a day.

For the bulk of the cottage children, who live chiefly on bread, their diet has always been insufficient because the impoverished white flour, demanded for its colour alone, is used instead of the genuine staff of life, finely ground whole wheat. Deprived of most of its phosphoric acid, iron, proteids, fats, and its valuable ferment, all of which stimulate the digestive tract into healthy activity, no wonder that its etiolated residuum, when used as a staple diet, forms the bedrock of malnutrition, and results in a C3 population. In the case of the present and the last generation, this began during the pre-natal life.

In England the method of cooking vegetables robs them of nearly all their nutriment; all the valuable salts are boiled out and thrown away. In potatoes the greatest value lies just beneath the skin, this is thickly peeled off and wasted; any remaining value is then boiled out, and that too goes down the sink. When one observes, analyses and reflects on the feeding of elementary school children, one can only marvel that they ever grow up at all. Other causes of malnutrition are ignoring the influence on digestion of fear, anxiety, grief, worry, mental or physical over-fatigue, and exercise immediately after a meal. Our grandmothers' plan of half-an-hour on the back-board for the child after dinner might be revived with advantage. Undoubtedly, to be huddled up in an armchair, or stooping over lesson books is a deterrent to digestion. Many waste the value of a meal for a child by insisting on its drinking half-a-pint of cold water immediately after, unaware that half-an-hour

before the meal is the most beneficial time to drink water. Digestion with many children is hindered by the habit of "bolting" the food. All authorities are agreed that food values are increased by the habit of Fletcherism. Far too little time is generally allowed for children's meals. They should be encouraged to give the minimum thirty-two bites to each mouthful, the food being unconsciously swallowed, instead of collecting it into a bolus and gulping it. Children should not be reproved for eating slowly as they often are.

Eating too much is another cause of malnutrition; while nervous emotional children generally eat too little, though their mothers often reflect on this point with pride. Not all realise that oxygen is a necessary food and that many children are starved in this respect, living and sleeping in rooms with closed windows. In the elementary school class, quite inadequate sleep is a common factor in the ill-nourished child. Children should be taught at school that growth takes place during sleep, and that their physical and mental welfare at maturity especially depends on their readiness to conform to the rule of early to bed. It would be a good plan were a table of the hours of sleep essential for all ages hung conspicuously in every elementary school, thus fitting the children for their own rule over the next generation.

The commonest results of all these mistakes are rickets, adenoids, anæmia, skin diseases, irritable temper, impatience, depression, restless sleep, bad teeth—at once a result and a cause—arrest of brain development, tuberculosis—ranging from glandular swellings to pulmonary tuberculosis. All this involves waste of money and education, also unmeasurable suffering.

To provide as nearly as possible the most nourishing diet for school children should be the aim of those in charge of them.

#### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Catherine Wright, Miss M. James, Miss J. Bacon, Miss T. Robinson.

Miss Catherine Wright writes: The principal causes of malnutrition in the school child may be traced, in many instances, to the ante-natal period, where, from physiological causes, the child has failed to receive its complement of nourishment from the mother, necessary to produce a strong and vigorous infant.

#### QUESTION FOR NEXT WEEK.

What special points should be observed in caring for (a) the blind, (b) the deaf?

## AN ELECTRICAL METHOD OF TREATING ENURESIS.

By J. NEIL LEITCH, M.B., B.S., M.R.C.S.,  
L.R.C.P.

Cases of incontinence of urine occurring in children often tax the patience of the doctor, and after being "drowned" in belladonna, if no improvement occurs they are left "to grow out of it."

I have recently treated a good many cases by an electrical method, and if care is taken in selecting suitable cases the method seems almost uniformly successful.

It is first necessary to eliminate any possible source of irritation, and it seems that in the residue the cause is lack of cerebral control or weakness of the sphincter.

The method adopted is to give strong "single shocks" from a faradic coil. The "Physio" coil was used for this purpose and adjusted to give 60 shocks per minute. The indifferent electrode, consisting of a pad, was placed either across the lumbar region or over the front of the abdomen, and the active electrode, small and button-shaped, was held on the central point of the perinæum. Treatment was carried out in this manner for 20 minutes two or three times weekly. The strength of current was in each case as strong as the patient could comfortably bear.

The following two cases are quoted as examples of the results obtained.

CASE 1.—A. P—, æt. 8, healthy. He always "wet his bed," and is a nuisance now he goes to school as he constantly has to ask to "leave the room." Seems bright and intelligent. Not circumcised, but no phimosis. Urine: No hyperacidity or bacilluria. No other apparent cause. Has had prolonged course of medicinal treatment, which was ineffective. Was treated by above method, and showed marked improvement after three applications and quite cured after eight. Now, four months after, he has been able to hold his water for a normal period, and has no trouble at night.

CASE 2.—W. L—, boy æt. 6, suffering from paralysis of left leg following poliomyelitis three years ago. This has been treated with sinusoidal Schnee baths and is improving considerably. He has had entire loss of bladder control, at any rate for the last two years while he has been under observation, and his bed was "always wet." It will be remarked that the sinusoidal baths did not improve this condition. Recently the same treatment was ordered for him and gradual improvement took place. In all over twelve applications were necessary, and

now he can hold his water throughout the night and is normal during the day.

Results such as these seem to warrant a wider use of this form of treatment.

We reprint from the *St. Bartholomew's Hospital Journal* the above article on a subject of considerable interest to nurses, as they not infrequently meet with cases of this nature, in which children are quite unjustly blamed. Nurses should always recommend that medical advice should be obtained when cases of incontinence of urine in children are brought to their notice.

## MEDICAL MATTERS.

### THE CARRIER IN FOOD POISONING.

The possibility of food infection by contact with a carrier seems, says the *Lancet*, to have been well established in a remarkable case of food poisoning reported from Lambeth. The circumstances in this case, according to the evidence of Dr. Joseph Priestly, the Medical Officer of Health, are as follows. The outbreak was confined to one house in which ten persons were living, all of whom were affected. One died, and Dr. B. H. Spilsbury said at the inquest that death was due to syncope from acute enteritis. Dr. Priestly ascertained that on the Saturday a stew of steak and liver had been prepared and consumed, the gravy being saved until the following day and warmed up with a Yorkshire pudding. On the previous Thursday the wife of the landlord, who undertook the preparation of the food, was taken ill, and the climax of her illness was reached on Saturday night, although she continued to attend to her household duties. Dr. Priestly expressed no doubt that the source of infection of all persons was the gravy from the liver, which was itself sound. The outstanding feature of the case, in fact, is that the person who prepared the food suffered from the same disease as the others two days before they were taken ill, and instead of going to bed she did the cooking for the whole of the household for two days, the result being that the liver gravy was infected. Dr. Priestly was inclined strongly to the conclusion that this person was a carrier of the bacillus, who having previously suffered from food poisoning, had, during culinary operations, sown that bacillus in the gravy of the repast. This evidence, we learn, is amply supported by subsequent bacteriological investigation, the causative bacillus having been found present in the organs of the deceased and in the blood of those who have survived.

## NURSING ECHOES.

The Report of the Nightingale Fund for the year ending December 25th, 1919, gives some interesting details in regard to the Training School. On December 25th of the previous year there were fifty-four Probationer-Nurses (of whom twenty-two were paying Probationers) remaining in the Nightingale School, and admitted up to the same date from the Preliminary Training School (of whom sixteen were paying Probationers and twenty Free Specials), fifty-seven, total 111.

Of these seventeen resigned or were discharged as unsuitable; thirty-six completed their Probationary year, and were taken on as extra nurses to complete their training; and fifty-eight remained in the Home on December 25th, 1919 (of whom twenty-two were paying Probationers and fourteen Free Specials). Fifty completed their term of service and were awarded certificates.

In the earlier part of the year the Staff of St. Thomas' Hospital, including the Probationers in the Training School, was visited for the third time in eighteen months with an epidemic of influenza. But for this unfortunate beginning, the health of the School has been uneventful, and the cases of sickness unusually low, and Dr. Turner, in making his Report to the Committee, expresses the opinion that the standard of physique of the School as a whole is remarkably high, as compared with that of the general community.

Miss Lloyd-Still, Matron of St. Thomas' Hospital, and Superintendent of the Nightingale School for the training of Nurses, reports that classes and lectures have been continued as in previous years with little change, and the work of the Preliminary Training School has been carried on in the same lines. Sister-Tutor reports forty-nine Probationers have completed the eight months' course of Tutorial Classes during the year. All have done steady work with genuine interest, and shown a corporate spirit that has made for a good uniform standard. The final examinations in practical nursing were conducted by Miss Montgomery, Matron of the Middlesex Hospital, assisted by Miss Coode. Five of the fifty Nurses who qualified for a Nightingale certificate qualified for the Gold Medal, and the medals were awarded to the first three in order of merit. *Gold Medal*, Miss Helen Margaretta Parke; *Silver Medal*, Miss Frances Emmeline Perry; *Bronze Medal*, Miss Dorothy Irene Harris. *Matron's Book* was awarded to the fourth and

fifth candidates—Miss Emily Fowke Ingle and Miss Mary Eleanor Wynne.

Fifteen Nightingale Nurses were appointed Sisters in Charge of Wards, Theatres, &c., nine Nightingale Nurses were appointed Charge Nurses, and five Sisters resigned their posts.

The Matron places on record her thanks to the many old Nightingale Sisters and Nurses who returned in 1914, offering their services to relieve existing Sisters and Nurses for work in the Navy, Army and British Red Cross Society. Had it not been for their help the continuity of the teaching in the Wards would not have been possible. Thus Miss Lloyd-Still reports with the help of Miss Coode (Sister of the Preliminary Training School) and Miss Gullan (Sister-Tutor), who remained at their civil posts, Nightingale Probationers received the highest standard of practical and theoretical training, which under war conditions could not have been otherwise accomplished.

Sir Napier Burnett, K.B.E., M.D., writing in the *Red Cross* on "The Scarcity of Nurses," says:—"This shortage of probationer nurses is not merely a hospital problem; it is also a question of some national concern, for the great majority of the nurses trained in our hospitals in due course pass into the service of the general community, so that the diminished supply of probationer nurses in the hospitals to-day will in three years' time reveal itself in a shortage of nurses for the private household. With the comparative recent experience in this country of influenza epidemics, I suggest that, as a nation, we cannot lightly contemplate a failure in the supply of private nurses. Every medical man realises that, with a greater supply of private and district nurses, the pressure on our hospital beds might be considerably lessened.

I submit the following reasons in explanation of the present falling-off in the supply of hospital nurses, namely:—

(1) The inducements offered in other professions. For example, a woman may become a trained masseuse in about a third of the time required to qualify as a nurse, and receive about double the salary. A stenographer can earn from £150 to £200 per annum after twelve months' training.

(2) Health Visitors and the School Medical Service, and even the Medical profession itself, are now absorbing a considerable number of women who have either trained as nurses or who would have been eligible for the nursing profession.

(3) A spirit of revolt against the long hours

of drudgery in ward work, and the low rates of pay that have hitherto obtained in this profession.

(4) A neglect on the part of the hospital authorities, or of the community in which the hospital is located, to offer facilities for the social welfare and general training of the nurses. Plenty of time and energy, as a rule, are expended on the professional side of her training, but far too little has been attempted in the way of providing opportunities for the more general development of the nurse's life.

If hospitals desire to obtain a larger flow of recruits to the Nursing Service, then each of the following points, as suggested by a Hospital Secretary, must receive due consideration, namely:—

1. Training—theoretical and practical—to be of the highest order, as certified by an outside examiner.
2. Salaries—adequate.
3. Quarters shall be comfortable.
4. Food—good and varied.
5. Regular annual holidays and frequent off-time duty.
6. Healthy recreations and general comfort should be arranged."

McGill University is to have a school for graduate nurses, opening next October, partly supported by the Canadian Red Cross and, it is hoped, by hospitals and other institutions. Two courses are proposed, one for public health nursing, the other in methods of teaching and administration of schools of nursing, enabling graduate nurses to utilise executive ability they may possess and train for positions of responsibility. McGill is the first Canadian university to offer the latter course. The nurse-director of the new school will be Miss Madeline Shaw, R.N., of Teachers' College, Columbia University, and a graduate of Montreal General Hospital.

The *American Journal of Nursing* reports that after the vote of the delegates at the Atlanta convention in favour of central headquarters in New York, the committee in charge made inquiry as to possible office space. It was greatly desired that this should be found in the building at 156, Fifth Avenue, where the National Organisation for Public Health Nursing is located, and it finally has been possible to secure it. Two offices have been leased, and Miss Albaugh will be office director for the present. The Red Cross finances the undertaking for the first year. The American Nurses' Association, the National League of

Nursing Education, and the Department of Nursing of the Red Cross are fully represented.

## THE GENERAL NURSING COUNCIL. RULES FOR REGISTRATION.

We note that in his address to the South Yorkshire Branch of the National Poor Law Officers Association, at Doncaster, Mr. C. A. W. Roberts, Master of the Walton Institution, appears to be under a misapprehension concerning the proposed Rules for the Registration of Existing Nurses, and is confusing them with those proposed for Intermediate Nurses. This is probably because at the meeting of the Council to which he alludes and at which the Press was admitted for the first time, the latter rules were under consideration. Mr. Roberts is reported to have said at Darlington:

"If there were any imbecile attendants and assistant nurses present at that meeting he called their attention to a meeting of the Nursing Council recently held. If they did not wake up, their livelihood might be taken from them. Although these officers might have given years to the Service and be perfectly efficient, if they did not hold a certificate they would have to look to it. That was a matter to which the attention of the Association should be called. They should see that safeguards were incorporated so that at least those in office should not be deprived of their office because they did not hold a certificate."

The draft rules for nurses in practice before November 1st, 1919 to be submitted to the Minister of Health, must conform with the Nurses' Registration Act, and the latter permits every nurse of good character whether she holds a certificate of training or not, to register during the term of two years grace. But the Government did wisely in limiting this privilege to those in practice before the above date. So no hardship in this connection is proposed as Mr. Roberts appears to think—indeed Parliament always deals very tenderly with prescriptive rights in founding professions, and usually ignores those of individual effort. To make matters clear, under the Act three classes of nurses have to be provided for: (1) Existing Nurses; those in practice before 1st November, 1919. (2) Intermediate Nurses; those whose training terminates after that date, and during the term of grace; and Future Nurses who will be required to conform to the standard of training and examination set up by the General Nursing Council, after the term of grace—presumably from 1923.

Different rules must be drafted by the Council for all three classes, and be agreed to by the Minister of Health, and by Parliament before they can be enforced.

Those for Existing Nurses, and Intermediate Nurses, have been drafted, and presumably after the adjournment of the Council when it reassembles, it will set to work in earnest to consider the future organisation of Nursing Education, the most responsible duty for which it exists.

# Royal British Nurses' Association.



(Incorporated by

Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

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## ON THOUGHT.

Many are the voices urging us to new constructive work; each one has his or her own theory to bring forward, claiming for it at least a trial. We must be moving on, and no doubt there is much which is good in all of their suggestions, but it is obvious that to give each one a trial would lead to more confusion. How, then, shall we proceed? Briefly, we must think. We must give careful attention to whatever project may be submitted for our consideration, and try to see whether it can be applied to the particular difficulty with which we have to deal. Now, how many of us really and truly understand what is meant by thinking—steady, helpful thinking; not those spasmodic rushes of ideas which lead us nowhere, but sober, reasoned thinking with a clearly defined object in view?

Thought should always be ahead of life, foreseeing things; at present we are much more apt to let thought lag behind, devoting itself to the study of dead organisms from which life has already passed away. Why linger with the corpses and memories, instead of moving forward with the life stream as it flows? We must realise that life unceasingly moves forward, and that only those whose thought moves forward also at an equal pace have power to blend harmoniously with the general stream. Those who do not so fit themselves for living must of necessity fall behind, becoming thereby obstructions which will in time be swept away out of existence. With our whole being we must move forward; we must move intelligently by means of thought to help us, remembering always that it is as adviser, reasonable and clear-headed, that thought comes to our aid. Thought alone does not constitute life, the motive of life lies chiefly in feeling which can persist without thought at all, but a life of feeling alone, vague and without thought, can only move onward to destruction. Let us repeat. Life is possible without thought, but such a life is blind and unintelligent, nevertheless *being* life it persists, but will eventually destroy. Thought can and must advise and direct feeling, so that life shall become inspired, intelligent, sane and constructive. Therefore, think! Think sanely, purely on great lines, having as the purport of

your thinking an architectural basis of sound construction, where the materials are living beings. But if you are unable to grasp so wide a vision, then grasp what you can. It lies in the power of everyone of us to think beyond his own horizon. Read history with the object of following how and by what *inner* causes nations rise and fall, compare the events occurring in our own time with those of past nations, and see in them foreshadowings of things to come. If you cannot grasp history in so wide a sense, then read the lives of men of thought and action, men of sound constructive ability, and by the example of their strength and weakness, follow in thought the future of men of our own time. And if even that be too difficult, then study the lives of those in your own circle, observe them with attention and reflect upon the probable causes which compel them to certain actions; try to foresee the future consequences of such actions, and so lay the foundation for constructive thinking which will grow wider and more comprehensive with regular practice. The greatest need of *this* age is to think, and yet again to think. Observe, and reflect upon what you observe; put aside personal likes and dislikes, try to understand a thing on its own merits, through its own laws, and not through any coloured glasses of your own. So will the life of feeling be enriched and made fruitful by the blending of sound thought, and of the material thus welded together your will, the Builder, shall have good store with which to carry on; for with our wills we ceaselessly build—there is no standing still in life.

M. C. Good.

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## MOVEMENTS OF MEMBERS.

Miss Alice Garstang has left England to undertake Child Welfare work in Serbia, and she will probably remain in that country for at least a year. She set out on receipt of a sudden and unexpected call through the International Child Welfare Fund, Bedford Row, which since the close of the war has worked for the preservation of the child life in that and other countries. Not a few of our British nurses have, in this connection, rendered unostentatious but magnificent and self-sacrificing service from which coming generations must yet reap a great reward.



## TRAINED NURSES' ANNUITY FUND.

In this holiday season nurses are probably finding themselves possessed of a greater amount of leisure than they can obtain throughout the whole of the remaining eleven months of the year, and we, therefore, take opportunity to remind them of the sale of work which is to be held for the above-mentioned benevolent fund in November. We shall be most grateful for all work sent to the sale and for the help thus given to us in our efforts to provide for the needs of sick and aged members of the profession. It is our desire to make this benevolent scheme self-supporting for the profession by the profession, and, although a very considerable number of fresh annuitants have been added to our list of recent years, we are anxious to make the fund a means of helping still other nurses who are suffering now severely from the effects of the under-pay and over-work which, for so many years, was the rule in the profession of nursing.

## SOME POINTS IN THE HYGIENE OF DIET.

Feeding in health is largely a matter of habit, and habit varies not only in different races but in different classes of society. Generally speaking, people in England are inclined to eat too frequently and to indulge in meals that are too large. Such habits tend to lessen the blood supply to the brain and also encourage auto-intoxication by developing unfavourable activities in the bacteria normally present in the digestive organs. Furthermore, it has been observed that a person who has had a heavy breakfast is much more likely to be hungry before lunch time than one whose breakfast has been a very simple meal. The heavier meal appears only to induce fatigue and to create a need for a fresh stimulus. Far more real nourishment is ultimately obtained from the lighter meal. Thorough mastication is also important, because not only is more complete digestion secured thereby, but the chances of over-indulgence in eating are considerably lessened.

If all possible benefit is to be derived from a meal, it is important not only that it should be nicely cooked, but that it should be served in the daintiest manner possible. This will have the effect of stimulating the flow of the gastric juice, and, through nervous reaction, the absorption of the food is more complete. Therefore, particularly in the case of an invalid, it is advisable to take trouble to see that the silver on his tray is bright, the tray-cloth spotless, that only a small portion of food is put upon his plate (for he can very easily ask for more), that food which should be hot is hot and not tepid; and that, when he has finished a meal, all food is removed from the

sick-room and not left in his sight "in case he may fancy it later." A few flowers on his tray will often act as a better appetiser than anything else ever prescribed; and, in any case, it is all such little matters attended to which will go a great length towards making the nurse successful with a case where perhaps another has proved a failure.

In ordinary food hygiene, this matter of providing a diet which is nourishing and at the same time economical is an all-important one. Statistics show that too many children in England are suffering from malnutrition; in fact, many children of parents, whose food-bills are comparatively large, are actually half starved, owing to the absolute ignorance of food values that so often exists among the women of the industrial classes in England. The following are among the most nutritious and economical foods in common use:—

**Proteins**—Lentils, beans, peas, meat (the cheaper cuts), oatmeal, haddock, herring, and eggs (during the season when their cost is not too great).

**Carbohydrates**—Brown and white bread, potatoes and rice.

**Fats**—Margarine, dripping, and the cheaper varieties of cheese.

In many of the houses of the poor there are very poor facilities for cooking, and a one-course dinner is often the rule; but this can be made quite as nutritious as a meal of two courses if the mother has but an elementary knowledge of food hygiene. Lentil soup, for instance, makes a very nourishing mid-day meal for school children, and at a very small cost. A suet pudding in cold weather will serve them also as a particularly useful meal, because of the source for heat and energy which it supplies. Porridge is comparatively little appreciated south of the Border, but along with milk it proves a very wholesome food for children.

The study of dietetics has in the past had far too small a place in the training of the nurse, and yet there is no more highly important branch of her work. The effect of a central examination for nurses is likely to cause the training schools to set their house in order in this as in other respects; but, meantime, there is no branch of study which nurses of the present day are likely to find more useful in their ordinary practice than that which relates to dietetics, and this is more especially the case where private nursing and preventive nursing are concerned. I. M.

## A WELCOME FOOD FOR INVALIDS.

All nurses and midwives appreciate the difficulty of presenting an easily assimilated, nutritious, and palatable diet to patients who are kept on milk diet. Glaxo presents a much appreciated variety, and is more easily assimilated than ordinary cow's milk.

ISABEL MACDONALD,

*Secretary to the Corporation.*

10, Orchard Street, W.1.

## LETTERS OF AN AUSTRALIAN ARMY SISTER.

A published volume of these circular letters of Sister Donnell's experiences under the Red Cross was not, we take it, originally intended, as they were written for her private friends. Probably this is the reason why they, to a very large extent, refer to the lighter side of life under the *régime* of an Army Sister. Her varied travels and delightful holidays are to be envied and will emphasise the great opportunities of pleasurable enlightenment and experience that the war brought into the lives of hundreds of nurses, who otherwise would never have been able to get very far from their immediate surroundings. From a professional point of view, the former portion of the book referring to the work in Lemnos is the most interesting. "The hospital is all that you would expect a field hospital to be. Entering it by the main thoroughfare, 'Macquarie Street,' with its marquees and tents on either side, you would see, instead of pretty little flower gardens in the square patches in front, maps of Australia, the emu, the kangaroo, and all sorts of reminders, made with white stones. Our chief luxury is exercise and fresh air, and as we get these in abundance, we bring a keen appetite to our tinned provisions served up on enamel plates. Yes, we are real waybacks. I'll warn you not to expect dainty maidens when we return—rather weather-beaten old hags."

Her home-sickness is constantly peeping out. "To-day I passed a dear little dog and stopped to play with him, and it suddenly dawned on me what a changed life we are living—no little children to love, no flowers, no pets, no shops, nothing dainty or nice."

A visit from Lord Kitchener is recorded. His "Well, boys, I hope you will soon be well," is noted; and his visit to the men in camp across the bay, "when he delivered the King's message that he was very proud of them, and said to the officers that our boys (the Aussies) were among the bravest soldiers in the world."

Sister Donnell managed to secure a snap of him, of which she was justly proud.

She draws a terrible picture of the sufferings of the boys on the Peninsula from frost-bite—hundreds being drowned because their feet were too paralysed to crawl away.

At this juncture she rejoices because the "grey bonnets that we disliked so much died a natural death there. Grey felt hats and coats are on the way for us."

"I think the experiences we had together at Lemnos formed a deep attachment among us all. I have said very little about our Sisters, and forgive my saying it (seeing I'm one of 'em), but our Sisters are just *fine*. One top-notch officer who had been nursed at Lemnos remarked that if No. 3 Sisters came within coo-ee of them, the No. 1 Sisters would have to look to their laurels. We have many smiles over our experiences and

when we first came to Cairo we were known as 'those shabby Sisters with the bright colour.' Our shabbiness was soon remedied, but I am sorry to say we are losing our colour in the horrible, dirty Cairo."

What she terms "the craze for inoculation" is her *bête noir*. "How I do hate it. The first dose!—I felt I nearly died. Now the second dose is coming along and rumour says others are to follow. I felt desperate so approached Matron though the answer was what I expected. 'No, Sister,' she said, 'there is no getting out of it. You *must* be done.' I am sure if it wasn't for the pleasure of working and doing for our boys—and that, I may say, is the biggest blessing we have—we should all be rushing to do transport work in Australia. . . . When I came back I'll be a walking bacteria shop."

As a set-off against these drawbacks she had delightful excursions to the Pyramids and to the Tombs of the Kings. "We start at 9 a.m., cross the Nile, and take donkeys or drive, as we please." Delightful! For lunch she owns to consuming half a chicken and five eggs. "After resting we go to see some other tomb, but I was too sleepy or tired, I don't remember what it was." (Obviously the eggs were at fault.)

Her impressions of England are given with a freshness that is very attractive. On the way from Southampton to Brighton "every man, woman or child cheers and waves to us as we pass, and we feel its just lovely of them to give us such a welcome."

"Green, green England. The clusters of mushroom rooms that we pass on the railway banks just make me and my pal itch to go and gather some. We arrive at Brighton (en route to the Kitchener Hospital) at 6.30 p.m., and truly we have never seen anything so gloomy and so dismal." This arrival, of course under war conditions, is graphically described, and certainly it must have been disquieting to these strangers from sunny Australia. "Ne'er a light, and pitch, pitch dark." She announces a little later. "We are not going to be a bit happy in England." First she considers the rations will be insufficient for "us hungry Australians;" the cook says we "92 eat more than the 140 English sisters," but the real grievance was the Matron's order. She said "I give it to you this once, and once only, I shall never tell it again. Now that you Sisters have got the rank of officers and wear stars, you are not to go out with N.C.O.'s or Privates, or speak to them excepting on duty. If you do so you will be sent away at once into a British hospital."

A protest was met with "That is the order, Sister."

"We never asked for stars—we have never received a commission from the King. Could we slight our boys so? This is worse than inoculation." The order was never enforced.

She is not keen on London, and is disgusted with the "tipping" custom; "here in the centre of civilisation the effect seems to me demora-

lising to the one that gives and the one that takes."

She speaks of the "beautiful beautiful snow"; and "better than anything else in England, I love it."

She is of course delighted by the decoration bestowed on her friend, Sister Ball, whose description of the ceremony is characterised with the same simple frankness which pervades the book. Most amusing, too, is her account of her subsequent reception by the Queen Mother. "We were all so full of adoration for the Queen Mother that one of the Sisters exclaimed: 'Oh, Matron, isn't she just the sweetest old thing?' A tall personage in a gorgeous red coat who was helping me into my coat, looked aghast at Sister; his expression said 'What will those Australians say next?'"

On the occasion of a visit to Windsor Castle, the King commissioned Princess Christian to act as his representative.

"The Princess was very nice and said how much she admired our uniform."

"In what way?" asks one of our Sisters.

"For its quietness and unobtrusiveness" she replied.

Then Sister said how good it was of them to do so much for us.

"No," she replied. "It's you who have come so far, leaving home and friends to do so much for us." She said she did not care for nursing herself, but had a great admiration for those who did."

Though admiring and much interested in the work of the Supply Depot in Cavendish Square, she is amused at the "typically English" notices of rules everywhere: "Please wipe your feet upon the mat," &c. Her friend was quite upset to see some of the old ladies (workers) so cantankerous. "She could only see pathos in the pettiness and thought such good work spoiled, but I could only see the funny side, for with it all they were very clever and witty."

Quite a pleasant volume, full of interesting incidents, told by one who evidently understands how to get the best out of life, and whose fresh impressions of new soil are quite contagious.

The publishers are Angus & Robertson, Ltd., 89, Castlereagh Street, Sydney.

### MILITARY MESSAGE SERVICE.

The Army Council has given instructions that 28 days' furlough on full pay will be given to mobile members of the Military Message Service enrolled for 6 or 12 months who were employed in places other than those in which their homes were located, provided that their first day of service was on or before November 11th, 1918; and that in any case their last day of service was subsequent to November 10th, 1918. Other mobile members and immobile members similarly enrolled will be granted seven days' furlough on full pay. These benefits in all cases will include, or be taken in aid of, any pay in lieu of notice.

## THE GENERAL NURSING COUNCIL FOR SCOTLAND.

The General Nursing Council for Scotland have, with the sanction of the Scottish Board of Health, appointed Mr. W. S. Farmer, Solicitor, 13, Melville Street, Edinburgh, as Registrar of the Council.

The General Nursing Council for England and Wales has established the precedent of appointing a trained nurse as its chief executive officer and we regret that the principle of having a professional Registrar has not been supported by the General Nursing Council in Scotland. The legal qualifications of the gentleman appointed are no doubt admirable.

### HOURS OF EMPLOYMENT BILL.

At the 7th meeting of the General Nursing Council, the Professional Union of Trained Nurses was accidentally omitted from the list of associations mentioned as consulted by the Minister of Labour (and to be consulted by the Minister of Health) on the Hours of Employment Bill. The Minister of Labour is taking steps to rectify the omission so that the P.U.T.N. shall be officially recognised and consulted in the matter.

MAUDE MACCULLUM.

## APPOINTMENTS.

### MATRON.

**Victoria Hospital, Southend-on-Sea.**—Miss Mand Elizabeth Parsons, R.R.C., has been appointed Matron. She was trained at St. Thomas' Hospital and has held the position of Sister at the Royal Infirmary, Leicester, Night Superintendent at the North Evington Military Hospital, and Sister Housekeeper at the Q.A.H. Hospital, Rochampton.

**Victoria Cottage Hospital, Romford.**—Miss Annie G. Duxfield has been appointed Matron. She was trained at the Union Hospital, Sheffield, and has been Staff Nurse at the Jessop Hospital in the same city, Sister at the Fulham Infirmary, and Sister-in-Charge, Theatre Sister, and Assistant Matron at the Emergency Hospital, Ilford. She is a certified Midwife.

**Workington Infirmary.**—Miss Jean A. Shankland has been appointed Matron. She was trained at the Royal Victoria Infirmary, Newcastle-on-Tyne, Charge Nurse under the M.A.B., Nurse at the Northern Counties Nurses' Home, Newcastle-on-Tyne, and Head Sister at Workington Infirmary.

### SUPERINTENDENT NURSE.

**Winchester Union.**—Miss Elizabeth Claydon has been appointed Superintendent Nurse. She has previously held the position of Superintendent Nurse at the Cuckfield Infirmary.

**Bramley Union.**—Miss Mary Eliza Stansfield has been appointed Superintendent Nurse. She was trained at the Leeds Township Poor Law Infirmary and has been Superintendent Nurse at the Lincoln Union Infirmary, worked as a Sister in Military Hospitals in England and Wales as a member of Q.A.I.M.N.S.R.

### SISTER.

**Guest Hospital, Dudley.**—Miss K. Cooper has been appointed Sister. She was trained at St. Bartholomew's Hospital, Rochester, and has been Staff Nurse at the Queen Victoria Cottage Hospital, Tonbridge.

## THE HOSPITAL WORLD.

### THE NATION'S MOTHERS AND BABIES.

It is more than six months ago since the Infant Welfare Centre in connection with Guy's Hospital was opened.

Though adjoining the Hospital it is self-contained and self-administered. Sister Martin, who is in charge, holds the certificate of Guy's. After and since the completion of her training she spent four years in the American Hospital in Paris, where she gained valuable experience for the work which she now has in hand.

The building has been adapted from three dwelling-houses which were the property of the hospital, and the transformation is so complete that it is difficult to imagine their former status.

The ground floor contains the necessary waiting, consulting- and weighing-rooms and offices, and, though the space is somewhat limited, the best use has been made of them.

The first floor is devoted to the Sister-in-Charge and her staff, and wonders have been accomplished in producing bright and cheerful rooms in a neighbourhood that is not famed for inspiration.

It is distempered throughout in a warm cream colour, and the staircase is laid in green mosaic. The rooms for the staff contain some one bed, and some two, and are prettily furnished, but with due regard to the enormous present-day prices.

The kitchen, scullery and bathroom are all to be found on this floor, which is in point of fact a very cosy, residential flat. A small annexe provides a cloakroom for the Health Visitors, so obviating the necessity of taking out-door garments into the bedroom, which, as every district nurse knows, is not desirable.

Training is given, for one year, to seven Guy's certificated nurses, who also hold the C.M.B. certificate. They are paid £50, and at the end of their year they are given a special certificate. At present they attend lectures at the Royal Sanitary Institute to qualify for the Health Visitors' certificate, but eventually it is hoped that these lectures will be provided in their own hospital. In the autumn twenty students of the International Red Cross, who are now being trained at King's College for Women, will attend the Centre for special instruction in Infant Welfare.

The ante-natal work forms by far the larger portion of the Centre's activities, as it covers the whole of the Guy's maternity area, where 3,000 cases are attended in the year by either doctors or midwives.

This area, however, contains many welfare centres for post-natal work connected with various organisations, so that the preponderance of ante-natal work is readily explained.

By the courtesy of the Sister-in-Charge we were allowed to see the post-natal clinic in full swing, and we must pause to pay a tribute to these South London babies whom we had every opportunity of viewing, as they were lying in the sketchiest of covering in their mother's laps

waiting for their turn for the doctor's inspection. Wire baskets were attached to the back of the chairs for the cleanly disposal of the infant's clothing, which reminded one somehow of being in church, every mother thus having the use of the chair in front of her. There is no bribing at this centre, nothing is given away, and no tea is provided. The mothers are taught to come purely from an educational standpoint. No sick child is treated here, as in such case it is immediately transferred to the hospital side.

The doctor was hard at work when she kindly invited us to come into her consulting-room, and we were struck with the intimate "heart to heart" talk she was having with the mothers. She was urging four-hourly feeding, both from the point of view of the mother and child, as she lays it down that the quality of the milk is improved by the longer interval, also that the child's nervous system requires the longer rest. The mother, she said, must remember that sleep was more important than food. Lastly showing sympathy with her poorer sister's nature, she pointed out that she, the mother, would thus have more time to devote to her own needs and to making herself look pretty.

Sister Martin, who has had the entire organisation of the Clinic from its beginning is to be congratulated on interesting work, and on her tact and attractive "plant."

### HOSPITALS ON THE RATES.

In the House of Commons, on Monday last, Dr. Addison introduced a Bill containing important provisions in relation to municipal hospitals, and enabling County Councils and County Borough Councils, if they think fit to maintain or contribute to the maintenance of hospitals. On August 11th, in reply to a question from Mr. Gilbert in the House of Commons as to whether the Government propose to bring in any legislation during the present Parliament dealing with the reform of the Poor Law, and in any way altering the composition of the bodies which now administer the existing laws, Dr. Addison replied in the affirmative.

### PALMOLIVE.

Palmolive—a good name for a good thing, for Palmolive soap is made of the finest Olive Oil and Palm Oil scientifically blended, and the fact that it contains no free alkali, and lathers freely in hard water, makes it essentially a soap which should commend itself to nurses and midwives, whose duty and pride it is to keep the tender skins of infants and invalids in good condition.

The word Palmolive conjures up the view of stately palms tossing their graceful heads against a bright blue sky, or of leaves turned to silver in the tropical moonlight. The palm is the emblem of victory and of supreme excellence, and the olive of peace and purity. Palmolive soap (13 and 14, Great Sutton Street, E.C. 1) is well named.



## Some Reasons why Nurses should join the Royal British Nurses' Association

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**I**T is the only body of trained nurses which has been honoured by incorporation by Royal Charter, and therefore Membership of the Royal British Nurses' Association gives to Nurses a status and prestige which no other existing organisations of nurses can.

Because, in order to become a Member a nurse must show evidence of possessing a three years' Certificate of Training in a General Hospital, and so, by becoming a Chartered Nurse and placing the letters M.R.B.N.A. after your name, you are recognised as possessing this high standard of qualification.

By becoming a Member you are entitled to wear the beautiful Badge of the Association—a Bronze Cross with the Royal Crown in the centre, and the national emblems of the four kingdoms between the arms of the cross. The R.B.N.A. is the only body of nurses which can place the Royal Crown on its Badge.

Because the Association has fought for many years to have Nursing standardized as a Profession by the State. This victory has been won for you and other trained nurses, but there is still need for effort to improve the position of the nurses. Every new name added to the Roll strengthens the power behind the Charter to press for better conditions and better salaries for you and your fellow nurses.

Because there is no lay control in this organisation. It is a professional body managed by members of the profession who have no employers' interests to serve, and, therefore, the members can trust the governing body to work for the interest of the working nurses.

**UNION IS STRENGTH. JOIN NOW.**

## BOOK OF THE WEEK.

## "QUEEN LUCIA."\*

Mr. Benson is so renowned for his amusing satire on the foibles of his fellow creatures, that the present volume needs no recommendation. Queen Lucia (pronounced in the Italian mode *la Lucia* the wife of Lucas) ruled the village of Riseholme with a secure autocracy pleasant to contemplate at a time when thrones were toppling and imperial crowns whirling like dead leaves down the autumn winds.

It was she who had been the first to begin the transformation of this remote Elizabethan village into the palace of culture that was now reared on the spot where ten years ago an agricultural population had led their bovine and unilluminated lives in these greystone or brick and timber cottages.

When Mr. Lucas had amassed sufficient thousands of pounds in firm securities, she had easily persuaded him to buy three of these cottages that stood together, in a low two-storied block, and had by judicious removal of partition walls transmuted them into a most comfortable dwelling adding on a new wing running out at right angles at the back, which was if anything, a shade more blatantly Elizabethan than the stem on which it was grafted. Mr. Benson is at pains to describe the house in detail which was as blatantly Elizabethan within as without. Her Shakespeare garden was surrounded by a yew hedge brought entire from a neighbouring farm, which cast its monstrous shadows of the shapes into which it was cut across the little lawn inside.

It was part of Lucia's form of culture to converse in Italian, but their Italian, firm and perfect as far as it went, could not be considered as going far.

Thus on Lucia's return after an absence, she was greeted by her husband with:

"*Lucia mia! Ben arrivata!* So you walked from the station."

"*Si Peppino, mio caro,*" she said, "*sta bene.*"

It was interesting to talk Italian, however little way it went. Georgie Pilson was her gentleman in waiting, her A.D.C., her devoted attendant. In order to save subsequent disappointment it may be at once stated there never had been or ever would be the smallest approach to a flirtation between them. Neither of them, she with her forty respectable years, and he with his blameless forty-five years had ever flirted with anyone at all.

But it was one of the pleasant fictions of Riseholme that Georgie was passionately attached to her.

Georgie was the type of man dear to Mr. Benson's heart, a male old maid, and an inveterate though amiable gossip.

Next to Lucia he was the hardest worked inhabitant of Riseholme, and as he was not strong he had often to go away to the seaside.

"Travelling by train fussed him a good deal, for he might not be able to get a corner seat, or

the porter might be rough with his luggage, so he usually went in his car to some neighbouring watering place where they knew him."

He had in common with the rest of Riseholme, strong artistic tastes, and in addition to playing the piano made charming little water colour sketches, which he had framed at his own expense and presented to his friends.

At the period at which the story commences, Riseholme was thrilled by the advent of a Brahmin, whom Mrs. Quantock, having abandoned Christian science, had annexed in order that she might successfully practice Yoga, and an amusing account is given of this imposter, who was in reality a waiter, and how he very successfully made fools of Riseholme Society.

The next excitement was the purchase of a house in the village by the prima donna, Olga Bracey, and the gradual dethronement in consequence of Lucia.

She invites Lucia and Peppino to meet the great Italian composer Signor Cortese, in order that they may converse with him in Italian. They find themselves in a most uncomfortable situation in consequence, told in Mr. Benson's best style, and which ended in the ignominy of the composer's suggestion. "Now we all spick English. This is one very pleasant evening I enjoy me very much. Ecco!"

This is quite a book for a lazy holiday afternoon. Its subject is of course trivial, and in other hands than its author's, might be banal.

We cannot help wishing that Mr. Benson would devote his great talent to more serious work, though we are grateful to him for his charming contributions to the lighter side of life.

H. H.

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**VERSES.**

We cannot kindle when we will  
The fire that in the heart resides.  
The spirit bloweth and is still,  
In mystery our soul abides;  
But tasks in hours of insight will'd  
Can be through hours of gloom fulfill'd.

With aching hands and bleeding feet  
We dig and heap, lay stone on stone;  
We bear the burden and the heat  
Of the long day, and wish 'twere done.  
Not till the hours of light return  
All we have built do we discern.

—Matthew Arnold.

**A WORD FOR THE WEEK.**

"Always to one who wants to do his duty it will become plain in the long run that he has to be prepared to stand alone, or at any rate to go against the majority."—Bishop Gore.

**COMING EVENTS.**

September 2nd.—Fête and Sale of Work, on behalf of the Prince of Wales' General Hospital, Tottenham, arranged by the Sisters' Hospital Aid Association.

September 5th to 20th.—Third Congress of International Associations, Brussels.

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\* By E. F. Benson. (Hutchinson & Co.)



## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE "COLLEGE" REGISTRATION GUINEA.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—I have received so many letters—mostly from nurses unknown to me—agreeing with my letter on this subject, that I ask them to accept this acknowledgment. Many state their reasons for joining, which, taken collectively, mean "they leapt before they looked." Blind acceptance of Matron's advice (who, probably, had not read the Rules of the Company), "thought it was the thing to do," and fear of a State examination if found unregistered, account for many of the 16,000. To those who have escaped, or those caught who now realise their mistake, I would say, "Save others—send the JOURNAL on to those 'who sit in darkness.'"

One nurse says she will not re-claim her guinea nor register under the State. "Why throw good money after bad?" she asks; "besides, I shall soon retire." "Why make any unselfish effort in this world?" is my reply. Because our employers have impeded State Registration for thirty years, so that it will be little use to many of this generation, is there any reason why should we not help to build up the profession for those who come after? By re-claiming the "misapprehension" guinea, the nurse puts her foot on an unprofessional method of obtaining money.

Another nurse sends me the College reply to her request for the return of her guinea. Briefly, she is to apply in due time to the General Nursing Council, pay their registration fee, send the receipt to the College Company, who will then (I suppose also, in due time!) refund up to £1 is. (and I suppose return the receipt, else the nurse might be in another hole). Her suggested reply is as follows (she is certainly awake now!): "Madam,—I note what you say about applying to the G.N.C. and forwarding registration fee; but that is not the agreement I entered into with the College. I was automatically and without further fee to be placed on the State Register, which the College cannot claim to have done if I have to pay meantime a second Registration fee and undertake the work of Registration and recovery of first fee myself. Even postage has to be considered these days. If the conditions under which the money was accepted cannot be fulfilled, the money should be returned at once."

Quite right, nurse! Keep a firm hand and make them fulfil their pledge or pay up at once, grateful that they have got off without damages.

I am, &c.,

J. B. N. PATERSON.

## THE SHORTAGE OF NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I think some of the reasons for shortage of nurses to-day are:—(1) The many temporary war nurses have seen the nursing conditions of probationers and therefore will not consent to train; (2) most people have tried nursing during the war and probably tired of it; (3) the varied vocations for a modern girl. A few years ago nursing was the only profession for a woman; (4) long hours in hospital, probably 10 or 11 hours a day on the feet, as a probationer is not allowed to sit down unless on a visiting-day when she makes bandages, &c. Even with the slight increase of "off duty" time a great many of the London hospital nurses work 60 to 70 hours a week. Lectures, classes and examinations are taken in "off duty" time. This leaves some days with no freedom; (5) bad housing—more than one bed in a room; (6) poor food or food that never varies during the three or four years' training; (7) small salaries while training and insufficient for responsible posts when trained; (8) enormous number of rules and regulations when "on" and "off" duty; (9) everyone knows that during this shortage of nurses those who *do* nurse will have to do double or more work. Also the type of girl must be deteriorating, for Matrons cannot be so particular if there is no selection.

The chief of these drawbacks to a nurse in training is the long hours causing too great a fatigue for recreation.

Yours faithfully,

V. H. HEDGES, R.N.S.

## REPLY TO CORRESPONDENT.

A Reader of the B.J.N.—We shall have pleasure in forwarding your donation to Miss E. M. Newman, whose appeal was recently published in this Journal. Her address is C.E.Z. Mission Dispensary, Rainawari, Srinagar, Kashmir.

## KERNELS FROM CORRESPONDENCE.

Sister B.—I am very glad to note that the press are now admitted to the meetings of the General Nursing Council. It is a wise decision. I read the report in the B.J.N. with pleasure and profit.

A Deluded Nurse.—"I thought I was on the State Register when I paid the College my guinea; now I find I am not, nor likely to be. The College ought to be made to 'deliver the goods.'"

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

August 21st.—What special points should be observed in caring for (a) the blind; (b) the deaf?

August 28th.—What measures would you take in the case of a woman in labour suffering from convulsions pending the arrival of a medical practitioner?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### EXAMINATION PAPER.

The following are the questions set at the Examination of the Central Midwives Board held on August 4th:—

1. Describe the placenta and membranes after expulsion, and your method of examination of them.

2. What is the common cause of retention of urine after childbirth? How would you deal with it? Why is it important to know accurately the amount of urine passed in the first 24 hours after parturition?

3. What are the dangers to the mother and child when the breech presents? How would you endeavour to avoid them?

4. What is your duty in the event of a yellow vaginal discharge being found during labour? What are the dangers of such a condition?

5. Under what circumstances would you consider the Second Stage of labour to be unduly prolonged? What are the causes of this condition?

6. What are the causes of sore buttocks in an infant? How would you treat them?

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

### EXAMINATION PAPER.

The following is the paper set at the recent examination for the certificate of the Central Midwives Board for Scotland:—

1. What parts of the child may be felt presenting at the os uteri during labour? How would you distinguish them from each other? And for which of them would you summon a medical practitioner?

2. What measures would you take in the case of a woman in labour suffering from convulsions, pending the arrival of a medical practitioner?

3. Give causes of and dangers in prolapse of the umbilical cord. How would you manage a case until the arrival of a doctor?

4. What is meant by placenta praevia? What symptoms does it give rise to, and how do you discover the condition?

5. What are the signs, symptoms, and treatment of Phlegmasia alba dolens?

6. What are the causes and dangers of a discharge from the eyes of a new-born baby? How can this be prevented, and what would you do in such a case?

The Examination of the Board on August 2nd and 3rd, held simultaneously in Edinburgh, Glasgow, and Dundee has concluded with the following results:—

The following are the successful candidates:—

### EDINBURGH.

Mrs. A. B. Anderson; Misses E. M. Chadborn, M. A. Cooper, A. Duncan, H. L. Ferguson, M. S. Ferguson, I. C. Gemmill, A. Gillespie, J. Grant, A. Hayes, M. G. Johnstone, A. T. McCallum, C. I. MacGillivray, J. MacIntosh, M. McKenzie, M. Munro, E. A. Nicolson, H. M. Potts, E. Priestman, J. L. Ritchie, J. A. Rose, A. Suttie, I. M. Tonks, A. R. Watt, F. V. Webster, A. M. Williams, G. Williams, F. S. Winter, A. Woodham.

### GLASGOW.

Miss I. Baillie, Mrs. C. Balshaw; Misses I. Bauchope, A. F. Baxter, J. Baxter, A. W. Beveridge, A. Mc Biggam, A. Borland, N. S. Boyd, Mrs. M. A. M. Burnett, Misses I. J. Cameron, C. Campbell, J. Campbell, I. McF. Clarke, J. C. Cowan, Mrs. J. F. Cunningham; Misses M. W. Davenport, A. I. Dobie, M. McB. Downie, M. A. Ellis, J. M. Farquhar, M. I. R. Fergusson, A. L. Flatman, A. Forrest, E. Forrest, M. M. Fraser, C. McG. Gibb, M. I. Gillbee, A. Graham, Mrs. J. Griffiths; Misses J. Hunter, C. Keith, Mrs. A. Kilmurray, Mrs. M. Logan, Miss C. D. Love, Mrs. I. Lynn; Misses M. H. Macfarlane, J. R. McGibbon, J. MacGillivray, R. A. McGough, A. McKay, I. MacKenzie, Mrs. S. McLaughlan, Mrs. J. McLeod, Misses M. MacLeod, A. J. Macpherson, E. O. Martindale, E. A. Milne, H. M. S. Moncrieff, M. Morton, S. O'Neill, J. Campbell, J. R. Proven, M. McB. Ross, J. G. Smith, K. W. Storrier, M. Tolland, M. A. S. A. Thom, J. M. Thomson, M. Thomson, S. N. Ure, C. C. Walker, D. Ward, A. D. Weir, B. Williamson, C. McI. Wilson.

### DUNDEE.

Misses A. Adamson, E. J. Allan, J. W. Blyth, H. Craib, M. Cruickshank, A. M. Dockrell, K. M. Dunlop, E. Innes, H. M. McFarlane, M. Noakes, E. M. Perks, Mrs. H. Reid; Misses M. M. C. Robbie, M. L. Shearer, G. B. Smart, H. D. Smith, J. D. Still.

*The Lancet* reports an inquest on the body of a woman where the cause of death was proved to be blood poisoning following upon confinement. The medical man in attendance upon the deceased stated that he found that the monthly nurse had a finger in a very septic condition. She admitted she had never passed an examination, and did not know the meaning of the word "antiseptic."

The Coroner expressed surprise that such a person had been employed. Our contemporary remarks: "The Nurses Registration Act, 1919, should, at any rate in future, operate to prevent such a person from securing registration under its provisions for an 'existing nurse's' registration; to enable such a person to be removed from the register if upon it; or to prevent such a person, not being on the register, from calling herself or pretending to be a registered nurse."

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## EDITORIAL.

### THE MINISTRY OF HEALTH BILL.

We briefly referred last week to the Ministry of Health (Miscellaneous Provisions) Bill presented by Dr. Addison, in the House of Commons, on August 16th. The Bill is one "to amend the law relating to the Housing of the People, Public Health, and Local Government, and for purposes connected therewith," and contains some very important provisions with regard to the supply and maintenance of hospitals, the regulation of the sale of clinical thermometers, the inspection of food and drugs, the medical inspection of aliens landing, or desiring to land, in the United Kingdom, and the provision of places for post-mortem examinations.

#### THE SUPPLY AND MAINTENANCE OF HOSPITALS.

In regard to the supply and maintenance of hospitals, Section II. of the Bill provides that (1) the council of a county shall have power—  
(a) to supply and maintain hospitals (including out-patient departments) for the treatment of illnesses and diseases generally, or for the treatment of any particular illness or disease, or any particular class of illnesses or diseases; and

(b) To contribute, on such terms and conditions as may be approved by the Minister, to any voluntary hospitals or similar institutions within their area; and

(c) To undertake the maintenance of any poor law hospitals or infirmaries within their area; and

(d) To establish and maintain, or to contribute towards the cost of or otherwise aid in establishing or maintaining, an ambulance service for dealing with cases of accident or illness within their area.

It is also provided that the Councils of two or more counties may, with the consent of the

Minister, and subject to such conditions as he may prescribe, combine for the purposes of supplying and maintaining hospitals under this section, and that any councils so combining may appoint a joint committee under section eighty-one of the Local Government Act, 1888.

Provision is made to enable county councils to recover the cost of maintenance in hospital from persons in a position to pay, who have been treated in hospitals maintained by such councils.

#### THE SALE OF CLINICAL THERMOMETERS.

Section twelve of the Bill prohibits the sale in the United Kingdom of any clinical thermometer, unless it has been tested, approved and marked in accordance with regulations made by the Minister, under penalty of a fine not exceeding £10 for each conviction.

#### EXPENSES INCURRED BY MEMBERS OF LOCAL AUTHORITIES.

Under section seventeen of the Bill provision is made to enable members of local authorities, or of any of their committees, to be re-imbursed for any expenses they may incur in travelling to and from any meetings of the authority or committee, and also for a subsistence allowance to any members attending such meetings, subject to regulations made by the Minister, and in accordance with a scale approved by him.

It is obvious that the effect of the provisions of the Bill, if it becomes law, as it is likely to do in the near future, will be of far-reaching importance.

The existence of a Central State Department under a Minister of the Crown specially charged with promoting the national health and actively engaged in so doing, must have a profound influence for good in this relation, and eventually raise the standard of national efficiency, prosperity, and happiness.

**MEDICAL MATTERS.****PROPRIETARY MEDICINES.**

1. The object of the Proprietary Medicines Bill, introduced by Viscount Astor in the House of Lords, as set forth in the Memorandum to the Bill, is to give effect to the recommendations of the Select Committee of the House of Commons on Patent Medicines, who reported in August, 1914, *see* Paper 414 of 1914. It contains no provisions which were not specifically recommended by the Select Committee, and it includes all their more important recommendations so far as they fall within the province of the Ministry of Health.

2. Provision is made for the establishment of a register of proprietary medicines and appliances, and of the owners thereof, and the Bill prohibits the sale of any unregistered proprietary medicine or appliance.

The expression "proprietary medicine" is defined in the Bill to mean a medicine which is held out by advertisement as of use for curative or remedial purposes, and which is either sold under a trade name or manufactured by a secret process.

Severe penalties are attached to the unauthorised disclosure by the registrar or any other person of the formula of any registered medicine.

3. The sale of remedies purporting to cure certain diseases, such as consumption or cancer, is prohibited, and it is made an offence to advertise any article in terms which suggest that it can be used to produce abortion.

4. The Minister of Health is empowered to remove from the register any injurious medicine or appliance, but the owner is given a right of appeal to the High Court.

5. The Bill, in accordance with the recommendations of the Select Committee, prohibits certain practices, chiefly in connection with advertisements, which the Committee considered undesirable.

6. All regulations made under the Bill are required to be laid before Parliament.

After the expiration of six months from the commencement of this Act, it shall not be lawful for any person to sell, or to offer or advertise for sale, any medicine or surgical appliance of any kind whatsoever purporting or stating directly or by implication to be effective for the cure of deafness or rupture or for the prevention, cure, or relief of any of the diseases or infirmities mentioned in the Schedule to this Act.

(These are cancer, consumption, lupus, fits, epilepsy, amenorrhœa and other diseases peculiar to women, diabetes, paralysis, locomotor ataxy, and Bright's disease.)

If the Minister is of opinion that the provisions of this sub-section should extend to any other disease or infirmity, he may, by regulations under this Act, add the name of that disease or infirmity to the Schedule to this Act: No person shall print, publish or distribute, or be concerned in any manner in the printing, publication or distribution of, any advertisement or communication relating to any article expressed in such terms as may, or are likely or calculated to, suggest that the article may be used or may operate as a means of producing an abortion or miscarriage.

If any person acts in contravention of this section he shall be guilty of a misdemeanour.

**FLEAS AND SCARLET FEVER.**

Dr. Hamer, Medical Officer of Health for London, is investigating the relationship which he is of opinion exists between fleas and scarlet fever. It is too early yet to draw definite conclusions, but the "flea curve" and the scarlet fever curve show marked similarity.

The flea incidence is calculated on the percentage of flea-marked beds found in common lodging-houses (the mean being 29 per cent.), and the percentage of school-children found to be bitten (the mean being 20 per cent.). Dr. Hamer has pursued this investigation for some years, and it was found that in 1913, 1914, and 1915 there was a sharp rise in the flea curve and a similar one in the scarlet fever curve. In 1916, on the other hand, the flea curve rose slightly and the scarlet fever curve fell slightly. If it is definitely established that scarlet fever is conveyed by fleas, yet another disease will be added to those which are insect borne, and a systematic war on fleas will be an important plank in preventive nursing.

**HOME TREATMENT FOR GONORRHOEA.**

Most doctors agree that vaginal douching in unskilled hands is not satisfactory, but there are cases where distance or other circumstances makes daily attendance at a clinic impossible, and a second-best method has to be resorted to.

The Higginson's syringe is the cheapest article on the market, but there are two objections to this: (1) Too much force is apt to be used; (2) The valves are liable to get out of order. At the cost of 5s. 6d. a "rotunda" syringe, Starcross brand, with a glass nozzle and celluloid jug-arch attached—which, although started by means of a bulb, works by syphonage—is now procurable.

Sisters of V.D. Departments, when home-douching is prescribed, are recommended to arrange with their dispensers to sell these to patients at cost price.

### NURSING ECHOES.

The Queen sent a cot-cover, worked in crochet and trimmed with pink ribbon, to the Giant Jumble Sale recently held at Exeter in aid of the Devon Nursing Association. The accompanying card was inscribed: "This cover, the work of her Majesty the Queen, is given by her for the benefit of the Devon Nursing Association." Another gift was a reproduction of one of Queen Alexandra's sketches, signed by herself. Over £1,000 was realised as the result of the sale.

The Ministry of Health have approved the proposal of the Greenwich Guardians to purchase a piece of land at Vanbrugh Hill, for a Nurses' Home, and have suggested to the Guardians that they should confer at an early date with the Architect of the Ministry as to the design of the proposed Home.

Mr. Alfred E. Miller Mundy, of Shipley Hall, Derby, a Nottinghamshire colliery proprietor, and a member of the Royal Yacht Squadron, has bequeathed £500 to Nurse Elizabeth Jagelmann.

At the annual general meeting of the Latheron District Nursing Association, the Rev. A. Gilfillan, who presided, congratulated the Association on a good year's work, and pointed out the immense benefits rendered to the parish by the services of a district nurse.

The report stated that Nurse Craig had nursed 126 cases, of whom 114 recovered, 8 died, and 4 are still on the books; 60 were medical cases, 48 surgical, 18 maternity. She paid 1,152 nursing visits and 167 casual visits. She carried out her duties for the past year with every satisfaction, and her work has been reported on very satisfactorily by Miss Robb, Inspector of Queen's Nurses.

Under the proposals for affiliation under the new County Scheme of Nursing the nurse will in future have to assist in the school medical inspections, and undertake child welfare and tuberculosis work. For any such public services rendered the Association will be remunerated.

Speaking at an American tea in aid of the funds of the Ruthwell Parish Nursing Association, Sir William Younger said they were all aware that the Government had decided upon the great necessity for a thoroughly efficient nursing service throughout the country, and also that local authorities in counties and burghs had been charged with the duty of

forming a maternity and child welfare scheme throughout the whole of Scotland. How needful such was they would appreciate when he told them that in Scotland in the years from 1911 to 1915 no less than 68,000 children under one year of age and 38,000 children between the ages of one and five years died. That was a very serious waste of child life. In their own county of Dumfries he found that in three years no less than 301 children died under one year of age. He thought they would all agree that that very high percentage of child mortality was certainly preventable, and that it was quite time that a scheme of that sort was established in our country.

The Bombay Presidency Nursing Association proposes to submit to Government revised rules, with the object of establishing a Presidency Nursing Service, through which it is hoped that nurses will ultimately be provided for all civil medical institutions throughout the Presidency.

Miss Mary E. Gladwin, an enrolled Red Cross nurse, has, says the *Modern Hospital*, recently received an honorary doctor's degree from Buchtel College, Akron, Ohio, from which she was graduated. This degree was conferred in appreciation of her Red Cross work in the world war. Before the late Miss Delano was appointed to the position of Chairman of the National Committee on Red Cross Nursing, Miss Gladwin was associated with her in Red Cross work in New York. She also served as chief nurse in the Dayton, Ohio, flood in 1913. When the world war began, Miss Gladwin was sent with the Red Cross Commission to Serbia, where for three years she acted as supervising nurse. In addition to her other duties she did relief work among the women and children of Belgrade. In 1917 she went to Salonica, Macedonia, as a special representative of the Serbian Hospitals' Fund, to receive supplies and distribute them, and to investigate and report on the needs of civil and military hospitals and on relief work being done.

The enlargement of the mind, and the expansion of the outlook, which comes from international association, implies possibilities for good, which—given the right personal characteristics, principally a sense of corporate responsibility—could and would be limitless. We hope much good will result from the Congress of International Associations convened to meet in Brussels from September 5th to 20th, in which the International Council of Nurses has been invited to participate.

## THE ORDER OF DEACONESSSES.

The Encyclical Letter issued by the Archbishops and Bishops at the close of the Lambeth Conference, and the Resolutions which it formally adopted in regard to the revival of the Diaconate of Women, recalls to our attention the practice of the Primitive Church in this respect.

### THE PRACTICE OF THE PRIMITIVE CHURCH.

In "A History of Nursing" we are told by Miss Nutting and Miss Dock that "the earliest Orders of women workers in the Church, and the ones especially concerned with nursing, were those of the Deaconesses and Widows. Later appeared the Virgin, the Presbyteress, the Canoness and the Nun.

"The chronicles of Christian nursing begin with the diaconate, which included men and women having similar functions, the chief of which was the care of the poor and the sick. From the earliest Apostolic times, deaconesses were placed on a level with deacons, and the title 'diakonus,' as used by St. Paul in speaking of Phœbe of Cenchrea, was applied equally to men and women. . . . Nor did the women monopolise the nursing.

"The deaconess, ranking with the clergy, was ordained by the bishop, with the consent of the congregation, by the laying on of hands. Her duties, like those of the deacon, were both secular and clerical. She was the first parish worker, friendly visitor, and district nurse, and from her day the work of visiting nursing has never been unknown. Although all converts to the primitive Church, more especially women with leisure, regarded it as a sacred duty to comfort the afflicted, it was the special duty of the deaconess to attend the sick in their own homes. She also visited prisoners, assisted the needy from Church funds, counselled the afflicted and carried the messages of the clergy. Her religious duties were very important. She taught, catechised and brought the women converts to baptism or baptised them herself; stood at the women's door in the churches and showed them to their places, brought them to the Lord's Supper, and assisted at the altar during the sacrament. Tuke and Malleeson, who give more explicit details than many writers, say: 'The terms used for the ordering of men and women clergy were identical. Both were ordained by the imposition of hands. The new deaconess then sang the Gospel. The Bishop placed the stole on her neck, after which she took the veil or pallium from the altar, and clothed herself

with it. She also received a maniple, ring, and crown. . . . She administered the sacraments to the confessors in prison, and in the mass communicated the women with the cup, the deacons communicating the men. In some places she read the homily, and deaconesses are mentioned in several ancient lectionaries.' Beside the deaconesses, sub-deaconesses are mentioned in records dating from the third century. They were not ordained by the imposition of hands, and did not count as a sacred order, but were elected, with the consent of the clergy, by the bishop. There were also archdeaconesses. St. Gregory of Nyssa speaks of his sister Macrina as an archdeaconess. The primitive deaconess might be married, or a widow or virgin. It was not until the second century that the sentiment in favour of celibacy became pronounced, and after that date the deaconess was required to be a pure virgin, or at least, a widow who had been but once married. She might also, as was equally the case with other orders of women, live in her own home, nor is it clear that she at first wore a special dress. The fourth council of Carthage mentioned a special dress for deaconesses who have 'put away their lay garments,' and a fresco from the catacomb Hermetis, representing two widows and deaconesses at the bedside of a sick person, shows them in an ample tunic, with stiff headdress going round the face. The deaconesses' liturgical dress was the diaconal alb, stole, and maniple.

"The deaconess likewise, at first, retained control over her property, and a State law then forbade her to enrich churches and institutions at the expense of those having just claims on her."

### THE LAMBETH DECISIONS.

The Lambeth Encyclical Letter includes the following clauses:—

### THE MINISTRY OF WOMEN.

"The duty of preserving and strengthening the fellowship of the Church belongs specially to a smaller fellowship within it, the fellowship of the ordained ministry. The three orders of bishops, priests and deacons have always been assisted in their ministry by many others who at different times and in different places have had different names and positions.

There has been much discussion of late about the admission of women to share in the ministry of the Church, both in the wider and in the narrower sense of those words; and the Church must frankly acknowledge that it has undervalued and neglected the gifts of women and



has too thanklessly used their work. It is the peculiar gifts and special excellences of women which the Church will most wish to use. Its wisdom will be shown, not in disregarding, but in taking advantage of, the differences between women and men. These considerations seem to have guided the primitive Church to create the Order of Deaconesses.

#### THE REVIVAL OF THE ORDER OF DEACONESSSES.

We have recorded our approval of the revival of that Order, and we have attempted to indicate the duties and functions which, in our judgment, belong to it. We also recognise that God has granted to some women special gifts of spiritual insight and power of prophetic teaching. We have tried to show how these gifts can be exercised to the greatest benefit of the Church. The arrangements which we have suggested are not applicable to all countries alike. Yet everywhere the attempt must be made to make room for the Spirit to work, according to the wisdom which He will give, so that the fellowship of the Ministry may be strengthened by the co-operation of women and the fellowship of the Church be enriched by their spiritual gifts."

The duties to be assigned to the new Order are embodied in the Resolutions of the Conference.

#### RESOLUTIONS.

47. The time has come when, in the interests of the church at large, and in particular of the development of the Ministry of Women, the Diaconate of Women should be restored formally and canonically, and should be recognized throughout the Anglican communion.

48. The Order of Deaconesses is for women the one and only Order of the ministry which has the stamp of Apostolic approval, and is for women the only Order of the ministry which we can recommend that our branch of the Catholic Church should recognize and use.

49. The office of a deaconess is primarily a ministry of succour, bodily and spiritual, especially to women, and should follow the lines of the primitive rather than of the modern diaconate of men. It should be understood that the deaconess dedicates herself to a lifelong service, but that no vow or implied promise of celibacy should be required as necessary for admission to the Order. Nevertheless, deaconesses who desire to do so may legitimately pledge themselves either as members of a community, or as individuals, to a celibate life.

50. In every branch of the Anglican communion there should be adopted a form and manner of making of deaconesses such as might fitly find a place in the Book of Common Prayer, containing in all cases provision for :—

(a) Prayer by the bishop and the laying-on of his hands ;

(b) A formula giving authority to execute

the Office of a Deaconess in the Church of God ;  
(c) The delivery of the New Testament by the bishop to each candidate.

We congratulate the League of the Church Militant (formerly the Church League for Women's Suffrage) which has a trained nurse, Miss S. A. Villiers, Matron of the South Western Hospital, Stockwell, as Chairman of its Executive, on the decisions of the Lambeth Conference. The League had the courage of its convictions and the faith to uphold them when they were unpopular and condemned by many. It has merited its reward.

## APPOINTMENTS.

### MATRON.

**Bulwell Hall Sanatorium for Children, Nottingham.**—Miss M. E. Dale has been appointed Matron. She was trained at the Victoria Hospital, Richmond, Yorkshire, and has been Staff Nurse at the Royal Hospital for Sick Children, Edinburgh, Sister at the Royal Infirmary, Oldham, Sister at the Royal Albert Edward Infirmary, Wigan, and Assistant Matron at the Orthopædic Hospital, Baschurch, Shrewsbury. She also served abroad during the war as a member of Queen Alexandra's Imperial Military Nursing Service Reserve.

### DEPUTY SISTER-MATRON.

**Romford Union.**—Miss Amy Phipps has been appointed Deputy Sister-Matron. She was trained at St. George's Infirmary, London, E., where she was subsequently Sister, and Night Superintendent. During the war she was Sister at a Military Hospital in France, and Matron at a War Hospital, Deal. In addition to her three years' certificate of general training she holds certificates as a Sanitary Inspector, a Health Visitor, the tuberculosis certificate of the Royal Chest Hospital, and the sick cookery certificate of the Universal Food and Cookery Association, and is a Certified Midwife. She is also an approved lecturer on Home Nursing and holds the "Insignie en Argent" of the French Army.

### SISTER.

**Putney Hospital.**—Miss Helen McEvoy has been appointed Sister. She was trained at the Kingston Infirmary and has been Sister at the Bermondsey Military Hospital.

**Addenbrooke's Hospital, Cambridge.**—Miss L. Folliott has been appointed Sister of Griffith Ward. She was trained at St. Thomas Hospital.

Miss Krella has been appointed Sister of Hatten Ward. She was trained at the Middlesex Hospital.

Miss Edith Hibberd has been appointed Sister to take charge of the X-Ray, Electrical and Massage Department. She was trained at the Middlesex Hospital, London, and was four years in charge of the Massage and X-Ray Department at Bolingbroke Hospital, S.W., three years Sister of the X-Ray and Massage Department, Coventry and Warwickshire Hospital, Sister-in-Charge of the Electro-Therapeutic Department at the Norfolk and Norwich Hospital, and Massage Sister at the Stanley Hospital, Liverpool.

### SCHOOL NURSE.

**Education Committee, Loughborough.**—Miss Annie Corbett has been appointed School Nurse. She was trained at the Bagthorpe Infirmary, Nottingham, where she was afterwards Sister. She is a certified midwife.

## HONOURS FOR NURSES.

The War Office announces that the following are among the Decorations and Medals awarded by the Allied Powers at various dates to the British Forces for distinguished services rendered during the course of the campaign. The King has given unrestricted permission in all cases to wear the Decorations in question:—

### CONFERRED BY THE PRESIDENT OF THE FRENCH REPUBLIC. CROIX DE GUERRE.

Staff Nurse S. C. Burd, Q.A.I.M.N.S. (Res.); Staff Nurse A. R. Colhoun (now Mrs. Crofton), Q.A.I.M.N.S. (Res.); Late Staff Nurse M. S. Dewar, Q.A.I.M.N.S. (Res.); Staff Nurse E. Garrett, Q.A.I.M.N.S. (Res.); Staff Nurse A. Lewis, Q.A.I.M.N.S. (Res.); Late Staff Nurse M. Marshall, Q.A.I.M.N.S. (Res.).

## THE HOSPITAL WORLD.

The Committee of the National Relief Fund, having taken into consideration representations made to it that financial difficulties are limiting their work to such an extent as to threaten widespread distress among the poorer classes in need of hospital treatment, and after consultation with the Minister of Health, have decided to appropriate the sum of £700,000 towards meeting the outstanding liabilities of the voluntary hospitals of the United Kingdom, incurred during the five years ending December 31, 1919, as a result of the war.

A further announcement as to the distribution of the grant will be made towards the end of next month. The Committee have decided to wind up the Fund at an early date.

Lord Knutsford has stated to a representative of the press, that unless some superlative philanthropist will endow the London Hospital to the extent of £2,000,000 or more, the alternatives are Government aid, and the closing of the Hospital.

The Committee of Management of the Metropolitan Hospital, Kingsland Road, N.E., hope at the end of the present year to be able to make a very satisfactory statement as to the financial position of the hospital. The £11,000 received from the King's Fund has helped to reduce the debt of £30,000, and the Special Appeal Committee has done splendid work in bringing its needs to the attention of the public in the district. A "Lest We Forget" carnival and procession through North-East London will take place on August 28, in aid of the £50,000 appeal of the Hospital.

The designs of Messrs. H. Percy Adams, F.R.I.B.A., and Chas. H. Holden, A.R.I.B.A.,

have been selected for the proposed extension of the Great Northern Hospital, Holloway. Architects who have specialised in hospital construction were invited to compete, and Sir Aston Webb, P.R.A., acted as assessor of the plans.

The 3rd London General Hospital, Wandsworth Common, is about to cease its existence as a war hospital. During the six years the hospital has been in existence it treated 62,708 patients, no fewer than 7,000 of these passing through the massage department. Practically every nation that participated in the war sent men for treatment.

There is at present a debt of £10,000 on the Royal South Hants and Southampton Hospital in spite of the fact that its income last year was very much larger than it has been in any year since 1910.

## THE SOCIAL MANAGEMENT OF THE HOSPITAL.

Anyone who is familiar with hospital routine would readily define the business management of the hospital as that branch of the hospital administration which embraces accounting, cost accounting, rate-making, office management, purchasing, stock keeping, the fixing of wages, the management of employees, and the preparation of the budget. Not yet, however, has there been developed a clear conception of the scope and significance of the social management of the hospital.

The term "social management" at first suggests social service, but hospital social service has to do with the social aspects of diagnosis and treatment, and its logical classification is under the head of medical service, of which it is a specialized form. Another possible connotation of the term social management is what is coming to be known as the "community relations of the hospital," a term which is most frequently used to cover the study of community needs and the adjustment of the hospital program to meet those needs, whether through individual hospital effort, co-operative hospital organisation, wider co-operation between hospitals and other social agencies, or finally, a complete community system of medical care. These are aspects of hospital management that fortunately are now receiving a great deal of attention; confusion will, perhaps, be avoided if we continue, in our discussion of them, to use the term community relations, and make other use of the term social management.

In calling attention to the social management of the hospital, I have in mind the attitude of the hospital toward, and its method of dealing with, certain problems of a non-medical character, affecting larger or smaller groups of individuals.

The principal groups affected are patients, the families and friends of patients, and the public at large. If we include under social management such varied problems as the service due to applicants for treatment to whom admission is denied; the accommodation of guests who are not patients; the disposition of complaints; the proportionate allotment of beds to free, part-paying and paying patients; the determination of dispensary fees, their graduation and remission; the regulation of professional fees in wards and private rooms; the restoration of the mental and physical vigour and occupational efficiency of convalescents through the provision of day rooms, patients' libraries, or occupational re-education; educational publicity, or the means by which the hospital informs the public of the scope and value of its activities, thus influencing each section of the public to contribute hospital support in proportion to its means—if we include all of these varied activities under a single head, the reader may ask just what quality or characteristic they have in common. The answer is that each topic has a definite social significance and that the hospital's attitude toward all of them should be determined by the single principle of social justice. Conventional hospital organisation provides for medical administration, nursing administration, business administration, domestic management, &c., but has not hitherto given to social management the distinctive place to which it is entitled.

In the hospital practice of the day the subjects which call for social management are treated as odds and ends which do not require systematic attention. The hospital which seriously endeavours to do justice to its rejected applicants is exceptional. Exceptional, too, is the hospital which bases its dispensary fees upon a thorough investigation of the resources and requirements of its dispensary *clientele*. In place of an honest attempt to do justice to the dispensary patient, the average hospital adopts in its out-patient department the fee schedule that is traditional in the community, modifying this, perhaps, to meet pressing financial needs, but doing so without much regard to the fundamental merits of the case. Throughout the list, the same tendency to the neglect or haphazard adjustment of important issues prevails. Such a notable community effort as the current Cleveland survey of medical needs and resources is but the exception that proves the rule.

If I were asked how to remedy the present situation, I could only make the conventional recommendation that a committee be appointed. The hospital which realises that the questions enumerated have a common ethical background, which is the first to name a standing committee to deal with them vigorously, ethically and continuously, will presently emerge from the indistinguishable crowd, and will win for itself a name for exceptional achievement in the sphere of social justice.

S. S. GOLDWATER, M.D.  
In *The Modern Hospital*.

## ANCILLARY WORK TO OUR MEDICAL SERVICE IN FRANCE.

I wonder how many people know of the work for the relatives of sick and wounded carried on in France during the war. I cannot give statistics of it—besides statistics are often meaningless, so I will content myself with a little account of *my* experience of the work. I applied to go to France under the Y.M.C.A. in June, 1918, and arrived in August at A—, just in time for the tail-end of those raids which were devastating northern French towns in a way that even Londoners can hardly realise. It was at A— that nine little Waacs were killed on Corpus Christi night, and their remains rest on the neighbouring hillside. The raids at A— were so bad that each night most of the townspeople trekked out to the villages around, and many people camped nightly in the neighbouring forests. The Y.M.C.A. staff had been turned out of their headquarters owing to its being bombed three times and left in a state of ruin, and had taken refuge in the Relatives' Hostel, a beautiful old town mansion built round a cobbled courtyard and dominated by a towering chestnut tree, and with a dainty garden behind in which Mdle. de B—, an ancient dame of the old aristocracy, had formerly superintended her flower-beds, gravel walks, and fruit trees. At this time there were no relatives visiting wounded; they were not allowed to come out, owing to the determined nightly raids, and the German advance, which latter had only just been turned. I found I was to take charge of *personnel*—a mixed assemblage of highly-educated professors, hut leaders, office staff, motorists and mechanics; it was a truly democratic household and extremely interesting.

The first night was enlivened by a raid, during which we, perforce, descended to the well-built cellar and there awaited death, or *les cloches*, which meant safety, amidst hundreds of neatly-binned bottles of choice wine belonging to Mdle. de B—'s heirs. Several Frenchwomen from a neighbouring street were there wailing and beating their breasts with an abandonment quite disconcerting to stolid Britishers. Others were quite silent, among them a shrivelled old woman of over ninety, who lived next door.

After a few days the ban against relatives coming out was removed, and I found I had to find accommodation for, first one, then two, and then an average of fifteen or twenty until the chateau was overflowing. In one room there would be the *personnel* enjoying their well-earned evening recreation, and in the next some poor bereaved mother grieving over her son's death of a few hours' back.

This could not continue, and as soon as possible the staff found quarters in another wonderful old mansion in a different part of the town.

I was asked which I would do—follow the workers or remain with the relatives. It was a hard question to decide, and I carried my diffi-

culties to the head of the Y.M.C.A. in France, to whom I had an introduction, and who was passing through the town. His answer was, "I wouldn't hesitate; there are ladies in England who would give anything for your opportunity; it is sad work but worth while, and the chances of being useful in it are many and great." That decided me, and for the remainder of my time I stayed with and tried to "mother" the relatives.

In some places the Red Cross took officers' relatives, and the Y.M.C.A. the people of the N.C.O.'s and privates, but in this hostel, the nearest one to the firing line, they were mixed, and we had the Lancashire mill girl and the agricultural labourer sitting next to the titled husband and wife, and enjoying exactly the same treatment as to billets and messing.

The chateau possessed fourteen bedrooms, accommodating in all about twenty-two, not including the French maids who mostly slept out. Each bedroom was kept ready for guests with clean sheets, towels, &c., and was numbered, and its number and accommodation known to the trusty orderly (an Indian cavalryman), whose duty it was, lantern in hand, to open the great gates in the middle of the night and let in the travel-stained visitors. An electric bell rang in his room and mine, and I quickly got up, and came down to superintend the welcome.

The relatives summoned to the bedside of their dear one were hurried across from any part of the United Kingdom, no matter how remote, and became the joint guests of the Government and the organisation receiving them. Everything was made easy for them, in London, on train and boat, fares paid (except in the case of officers' relatives who were able to afford it), and they were motored quickly up from the Channel Port to the hospital.

After seeing the patient, if he was not in immediate danger, they were brought to the chateau and given a good meal with hot drinks and put to bed in one of the quaint tapestried rooms, with canopied and curtained beds and glorious furniture, in one of which it was said Royalty had slept.

Hot water was provided, but the wash-hand-basins were sadly small, often not much larger than a respectable British sugar bowl, and every drop of water had to be pumped from the courtyard well.

The next morning, after a good breakfast, they were motored to hospital, where they remained until dinner in the middle of the day, and then they were taken to the hospital till supper time, tea being provided in the hospital hut. In the evening the great object was to divert them if possible by music, books and even games and the cinema, a private view of the last being sometimes given in the long *salle à manger*.

A large percentage of the patients it was found turned the corner on the arrival of their relatives, and began to recover; this was due to the mental relief which was as a weight in the scales. For doctors did not wait until there was no hope—they considered the patients' welfare

and sent for parents or wife when they thought their arrival would give a new lease of life. And the relatives who came—some were women with babies in their arms who had only had time to throw a shawl over their heads; they had no luggage, and we were able to lend them change of clothing from our store; others were fur garbed and bejewelled, and came with leather suitcases and dressing bags.

One old couple, dazed and bewildered, had never left England in their lives, and had never expected to; again, a Scottish mother and sister who had come to see a boy of 19 with three limbs gone, and only kept alive by transfusion of blood from another patient. Incidentally how can one say enough for the magnificent work done by the doctors, nurses and orderlies, not to speak of the motor drivers, driving through the night in mist and fog along the endless poplar-lined roads of France.

And sometimes the patient died; and then all in the house, French maids included, turned all their energies to trying to comfort as far as possible *les parents de blessés* the poor bereaved, suffering in a foreign land, but what could we do? Nothing but sit with them, listen to them, throwing out all the sympathetic thoughts possible, and seeing that creature comforts such as a blazing fire, hot tea or coffee, etc., were not lacking.

Then came the funeral, after a day's interval, and we followed the flag-covered coffin to the military cemetery on the hill outside the town. At these funerals, most reverently conducted as they were, I had the privilege of being able to suggest and get accepted, a reform in detail, which though a small one, meant a great deal to the relatives present. When the coffins on the transports arrived from the various hospitals, they were lined up in a row just below the burying place. Now the rule of the army is that the funerals take place in the following order, Church of England, Nonconformist, Catholic and Jew, so when the transports arrived and the padre waited, the attendants had to lift up each Union Jack to see which denomination each soldier belonged to. One mother turned to me and said: "They don't seem to know which my poor boy is." After a word to the sergeant majors of the hospitals, this method ceased and the coffins were sent out in order according to denomination. The Last Post sounded, the gerbes or wreaths of flowers laid down by the grave, we drove back to the chateau, and there the relatives were given lunch before proceeding to the station armed with packets of sandwiches and a beautiful coloured print of their son's or husband's last resting place.

Though all entertainment was free, sometimes the officers' relative or the richer visitors gave me a donation, and this I always spent in laying flowers on the graves, or more often in carrying large baskets of luscious fruit round the hospital wards.

And now, thank God, there is no need for the work of "Relatives of Wounded," but I shall always be grateful I was privileged to help in a small way in one of the most humane enterprises of the war. MARGUERITE FEDDEN.

**"THE POWER OF THE ALUMNÆ."**

Miss Annette Alison, R.N., of Oakland, California, in her lately published work, entitled "The Power of the Alumnæ," says: "The Alumnæ is the link in our chain which must receive attention if we, an organisation of educated women, are to take and keep our place in the vanguard of civilisation." She goes on to say that though the managing board of every hospital has the interest of the student at heart this interest must cease to a great extent after the graduation of the nurse. The moment when the nurse is thus thrown upon her own resources is the stragetic moment for the Alumnæ. Meanwhile its members have grown more or less worldly wise in their art, are in a position to look upon both hospital and graduate at their face value; they thus form a basic line in a triangle of great strength, and are in a position for better handling all questions relating to the profession, holding together the graduates, guiding them steadily and surely into their proper affiliations with District, State and National organisation.

Miss Alison laments that such an important connecting link can be under-rated or overlooked.

In the chapter "Affiliation," she says, "The problem is how to enlist this great white-froked army under the banner of the National Association."

She points out that where there is no Alumnæ to hold the graduates of a school together, they may leave the institution that day and, so far as the majority is concerned or interested, they may be lost sight of that day.

The line of work which becomes theirs upon graduation is "*The guarding of their own interests and the interests of others.*"

She goes on to sketch out some suggestions for a successful conduct of Alumnæ, and a very useful one is that the younger members should spend an afternoon once a month with graduates of other training schools for communion and edification. She congratulates the National Directors on their decision that the Alumnæ, in order to be identified with the National body, must be affiliated to the District. "It is a happy solution, for now the power to entertain national questions becomes the duty of the Alumnæ as does also the privilege of advancing new ideas." In the chapter headed "State Registration," she recommends that every superintendent shall have first been a "graduate of the Teachers Course at Columbia University, and come to the training school equipped with the necessary knowledge to handle not only the work of the hospital, but human beings, with hearts and feelings as represented by the student body. They have their rights too, and will measure up better when they are the better considered."

The book is printed by Everett S. Dowdle, 1417, Franklin Street, Oakland, Cal., price 1 dollar 50 cents.

**THE WOMEN'S VOTE IN U.S.**

Our warmest congratulations are extended to the women of the United States of America on obtaining the Amendment to the Constitution securing to them the Federal Vote. Even now the forces of re-action are busy, and the anti-Suffragists in Tennessee, the 36th State in favour of the measure, are endeavouring to nullify the ratification; but there is little chance of their tactics succeeding, and American women will shortly vote for the first time in the Presidential Election. Most especially do we congratulate Miss L. L. Dock, who threw herself into the fight with characteristic courage and intensity, on the victorious result of the campaign.

**THE INTERNATIONAL COUNCIL OF WOMEN.**

The next Quinquennial Meeting of the International Council of Women is to be held in Norway, from September 8th to 18th, 1920. The Norwegian Council hopes to provide hospitality for the officially appointed delegates of the various National Councils. The cost of the passage at present averages £11 for the single journey.

According to the official announcement, the only British women who will be admitted to the meetings, in addition to the delegates and proxies, are Quinquennial Contributors of £5 to the International Council of Women, whose names have been sent to the I.C.W. Secretary, on the recommendation of the British National Council. We do not understand this regulation, as no such provision has ever before been enforced; it can only have the effect of limiting attendance at the Quinquennial Meeting to well-to-do persons, to the detriment of its national character.

**BOOK OF THE WEEK.****THE LEOPARD AND THE LILY.**

This new historical romance is of the middle of the fifteenth century, when François II reigned in Brittany.

He came to the throne in a time of peace, but from the hand of François himself came the glint of the sword that brightening smote the country into factions, the little quarrels that spread into civil war, the little whispers that grew into foul slanders, the petty jealousies and intrigues that became heartbreaks and miseries.

And the beginning of this was the coming to the Court of Rennes, of Guy de Montauban, a penniless Breton nobleman who had gradually spread his influence till the Duke had become a mere puppet in his hands.

It is around these disputes and intrigues and civil war that the story is woven, and de Montauban's baleful influence colours the whole book.

Gilles, a younger brother of François, loves, and is betrothed to, Françoise de Dinan, by five years his senior. "She was a poet, musician, selfish, beautiful, passionately enamoured of the graces of

life, colours, fancies, artificial emotions. Elegant in manner, refined, witty, brilliant, charming, she was by nature false, and in that sense true at least to herself."

Such a woman was bound to have many lovers. Gilles, of Brittany, sincerely loved her, and she had taken him for the wealth and position he could offer her. He had much of the ancient chivalry that never questioned a woman's word sworn with kisses.

Shortly after their betrothal Gilles is sent by his brother on a mission to England, and though at first he was glad to be entrusted with it, he is filled with misgiving at leaving Françoise, and confides in his friend Kristopher, the Irishman.

"She is so alone—and so beautiful! *Mon Dieu*, did you ever see such beauty, Kristopher, *mon ami*?" He entreats his friend to look to her while he is away and to protect her from Montauban should need arise.

Kristopher Fassifern was in reality Verdun of Valence and Lord of Coventry, who was exiled as a traitor from England, owing to the treachery of his wife for whom he chivalrously bore the blame, but whom he had nevertheless cast out of his heart and life.

Unfortunately for his peace of mind, in which was involved loyalty to his friend, he also felt the magnetism of Françoise, and such as she knew of love she gave to Kristopher.

When rumour said that Gilles had turned traitor, she would have gladly broken troth with him, and Kristopher does violence to his own heart when he insists upon her faithfulness.

"He is true?" said Françoise in a strange voice. "You think so?"

"Do you want me to swear to it," said Kristopher, "pledge my honour on his—would you believe that, my lady?"

She raised her eyes looking straight into his through the dusk. "I don't want to believe," she said; "I don't love him—and you know it."

Kristopher stared at her, the blood beating in his face. "You love me," he cried suddenly. "By heaven you love me! My French lily." But after a scene when wild words of love pass between them, his true honourable nature reasserts itself.

"Gilles?" he muttered, "Gilles?"

"Gilles" she cried passionately. "Would you put him between us—now?"

"Now," answered Kristopher, "Now between us—now and—always."

Yvonne Marie, Kristopher's wife, had fallen in her fortunes since their separation, and earned a living as a strolling dancer. She had never ceased to love her husband, and the bitterness of that separation and remorse resulting from her act of treachery had made her a better and nobler woman.

They meet again when Yvonne is sick almost to death. "For a second Kristopher stood looking at her, her delicate prettiness had gone, only her grey eyes were the same. He came closer, he was no nearer sympathy or forgiveness for her than he

had been five years ago—but he was looking at her from a different level—he knew what it was to be tempted, almost what it was to fall. He no longer felt the utter scorn of something so low, but rather pity for something so weak."

She reinstates herself in her husband's estimation, if not in his love, by her heroic action in finding out Gilles when he is dying, and reassuring him as to Kristopher's loyalty.

The closing scene of the book is one of terrible tragedy, where Françoise meets with a violent death instigated by La Rose Rouge as a result of his mad jealousy.

"Ride her down," he thundered to his men.

"Her face, her hair, the golden lilies of France, were mangled together; her proud blood was beaten into the dirt and spattered over the horses' hoofs."

"Ride on," came Eugerrand's voice, "Ride on!"

And so they passed in a mad gallop through the forest of Hardouinaye, leaving the dogs to deal with Françoise of Brittany."

Miss Bowen's works are always worth reading, but we do not consider this romance one of her greatest achievements. H. H.

### ROSEMARY.

Singing she washed  
Her baby's clothes,  
And, one by one,  
As they were done,  
She hung them in the sun to dry,  
Upon a waiting bush hard by,  
A glad expectant bush hard by,  
To dry in the sweet of the morning.

The while her son,  
Her little son,  
Lay kicking gleeful,  
In the sun—  
Her little, naked, Virgin son.

O, wondrous sight! Amazing sight:—  
The Lord, Who did the sun create,  
Lay kicking with a babe's delight,  
Regardless of his low estate,  
In joy of nakedness elate,  
In His own sun's fair light!

And all the sweet, sweet, sweet of Him  
Clave to the bush, and still doth cleave,  
And doth for evermore outgive  
The fragrant holy sweet of Him  
Where'er it thrives  
That bush forthgives  
The faint, rare, sacred sweet of Him.  
So—ever sweet, and ever green—  
Shall Rosemary be queen.

JOHN OXENHAM,  
*In The King's Highway.*

### COMING EVENTS.

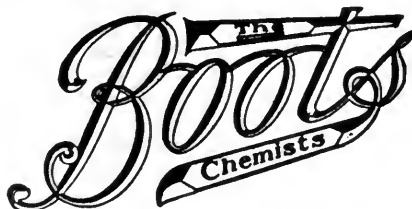
September 2nd.—Fête and Sale of Work, on behalf of the Prince of Wales' General Hospital, Tottenham, arranged by the Sisters' Hospital Aid Association.





# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## THE GENERAL NURSING COUNCIL.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—I read with much interest the proceedings of our professional Council. I also noted with apprehension that the "College" element seemed to vote (for the Education Committee) on the principle of putting in College Matrons rather than a known authority on Public Health work. Matrons may be educational experts, but the Matron who has never spread her wings beyond the pinnacle of hospital life is no authority on the various branches now filled by nurses "out in the world." I am, &c.,

PUBLIC HEALTH NURSE.

## LEST WE FORGET!

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—While walking recently down a street close to Oxford Circus, I was accosted by a man who carried a heavy basket filled with white heather.

I was about to turn my face from this poor man, when, at the same moment, his silver badge caught my eye and his weary dejected expression caught at my heart.

"O, please, madam, do buy; I haven't sold one piece to-day."

The few coppers I was about to offer him sneaked back ashamed of themselves into my purse and I stayed to hear his story.

He was a wounded man who had served nearly four years, and his papers, which he showed me, proved 40 per cent. disablement. He was an engineer before the war, but his contracted hand, scarred with many wounds, rendered a resumption of his trade impossible.

"I suppose I don't know the way to sell flowers," he said; "people don't even stop to look."

Had he no pension? Yes; 16s. weekly—which he again produced papers to prove.

He had married since his discharge, and hence no provision was made for his wife and three little children.

He assured me there was absolutely no food at home, and "how I am going to find 7s. 6d. for rent to-night the Lord only knows. I see my wife getting thinner every day—well, same as me, if it comes to that. I'm fair broken-hearted," he said, weary tears coming into his eyes. "You're the first person who has spoken a kind word to me to-day. I'm going straight to the Post Office to send this home," he said, looking down at my few inadequate shillings in his hand.

Unfortunately, sentiment for the moment obliterated my practical sense, and I omitted to get his address.

I hope I may meet him again.

It seems extraordinary that the surplus funds

of the Red Cross should not have been devoted to the after care of such cases as these, which are a blot on our nation.

A PASSER BY.

## THE CASE OF THE ELDERLY NURSE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—As an influential member of the profession, to which I have belonged since 1891, I should much like to ask you whether some posts where the age limit can be extended many years could not be thrown open to nurses like myself whose training dates back to thirty years ago.

I cannot think that mine is an isolated case. Since leaving the last hospital, of which I had charge, in March last, when it closed, I have not found it possible to get any good professional post, and am now in a non-professional post where the hours are long and the remuneration inadequate. I do not think it any use to appeal to the College of Nursing, as a former member of the Council told me it "was evident my nursing days were over," and this in spite of the fact that I had done continuous work since 1891 (when I trained in a large London hospital) with the exception of five years—from 1912—when I took a rest. Is it possible that if workers are needed in the office of the General Nursing Council, these posts may be filled by nurses up to the age of 55 years?

With apologies for troubling you, Madam,

I am, yours faithfully,

A LONG-AGO TRAINED MEMBER OF  
THE NURSING PROFESSION.

[An age limit is not imposed in regard to all vacant appointments; we should advise our correspondent to watch our advertisement columns.—ED.]

## KERNELS FROM CORRESPONDENCE.

*School Nurse.*—Health Leagues for School Children are a capital idea. I hope they will be organised throughout our schools. I am sure they would appeal to children and that they would respond to their teaching and influence.

*Ward Sister, London.*—Why is it that more attention is not paid to dieting of the nursing staffs in hospitals? It is all important to their efficiency. I agree with your correspondent who draws attention to the monotony of the food provided during training. It is one of the things which prevents the modern girl from taking up nursing as a profession.

## OUR PRIZE COMPETITIONS.

## QUESTIONS.

*August 28th.*—What measures would you take in the case of a woman in labour suffering from convulsions pending the arrival of a medical practitioner?

*September 4th.*—What are the principal drugs taken by drug addicts? What precautions would you take in regard to such patients, and what are the nursing points in caring for them?

# The Midwife.

## THE DAWN OF A NEW ERA IN OBSTETRICS.

The report of the proceedings of the Section of Obstetrics and Gynaecology at the eighty-eighth Annual Meeting of the British Medical Association recently held at Cambridge, published at length in the *British Medical Journal* of August 21st (the official organ of the Association) is not only extremely important but of absorbing interest.

The President of the Section, Dr. Herbert Williamson, F.R.C.P., in opening the session said in part:—

“Our Meeting this year is one of peculiar importance, for we see on the horizon the dawn of a new era in obstetrics. . . . The State is awakening to the fact that in the past it has failed to discharge its debt to the mothers of the race, and has grossly neglected the things which make for their safety and happiness; there is to-day a sincere desire to correct these errors, and the questions involved are receiving an earnest and disinterested consideration such as has never been accorded them before.

“I will indicate briefly why the subject of puerperal sepsis has been chosen for our discussion this morning. In the first place we have come to realise that obstetrics is essentially a branch of preventive medicine. I do not think it is speaking too strongly to say that it is the most important branch of preventive medicine. The dangers of childbirth are to a great extent preventable, and the more clearly this idea is grasped and acted upon by the medical profession and the general public the lower will be the puerperal mortality and morbidity. . . .

“In the second place from amongst the horrors of war there has emerged a clearer conception of the principles of wound infection, and particularly of muscle infection, than we have ever had before. It is essential that we should, without delay, apply the knowledge we have gained to the treatment of that infected muscle the septic puerperal uterus.”

### DISCUSSION ON PUERPERAL SEPSIS.

The introductory paper on Prevention and Treatment was presented by Dr. Victor Bonney, M.S., B.Sc.Lon., F.R.C.S.Eng., from which we extract some of the points of interest to nurses and midwives, but strongly advise those who are able to read the paper in its entirety. Prevention is a point with which they are intimately concerned.

### PREVENTION AND TREATMENT.

The solution of the problems how to prevent and how to cure septic infection of the puerperal uterus necessitates the correct answering of three fundamental questions:

1. What is the original source of the organisms?

2. How do they get into the uterus?
3. What is their exact situation by the time they have produced symptoms of sepsis?

### THE ORIGINAL SOURCE OF THE ORGANISMS.

In nearly all severe cases of puerperal sepsis the streptococcus, either alone or in conjunction with *B. coli communis*, is the predominant organism. The infection may be either autogenous or heterogenous—that is, the organisms may have been resident in the patient before the confinement, or may have been introduced from without during its course or afterwards. Which of these two happenings, infection from extrinsic sources, or infection from intrinsic sources, is the commonest? A consideration of the facts leads me to hold very strongly that the infection in most cases originates from an intrinsic source, but this is not the view which up to now has been generally held.

### INFECTION FROM EXTRINSIC SOURCES.

Infection from extrinsic sources was no doubt the cause of the epidemics of puerperal sepsis which in the past periodically decimated lying-in hospitals, and which the introduction of antiseptic midwifery has succeeded in abolishing, and at the present day it is certainly still operative in those instances where a series of cases of puerperal fever occurs in the practice of a midwife or doctor. But, speaking broadly, the occurrence of the disease at the present day is sporadic, not epidemic, my experience being that the case to which one is called in consultation is most often the first disaster of the kind that has befallen the doctor after many years of successful obstetric work.

The conveyance of septic organisms from one patient to another in the practice of home-conducted midwifery requires a degree of carelessness, or rather dirtiness, which is surely uncommon nowadays, and moreover such conveyance postulates special circumstances of propinquity and time which only generally obtain in institutions where a number of patients are gathered together under one roof. Thus between the attendance on a septic case yesterday and a confinement to-day the morning bath and several washings of the hands intervene, quite apart from any active antiseptics. The streptococcus of high virulence is a delicate organism which dies rapidly in the open air, and which is easily overgrown in an incubator by other organisms even at the temperature of the body, and still more readily at room temperature. For its experimental inoculation to be likely to be successful it requires to be transplanted direct from one culture medium to another, and this is probably true of the accidental inoculation which causes puerperal fever. Further, the prevention of infection from without is a relatively simple matter, for the wearing of boiled gloves and the sterilizing of all

instruments and appliances renders its occurrence unlikely even in institutions, and still more so in home-conducted labour, where proximity to septic conditions does not as a rule obtain.

Now, antiseptic measures, more or less of this kind, are almost universally used in obstetric work at the present day and have been for many years; yet, when we examine the result, we find to our surprise that although the epidemics of puerperal sepsis that were common in the days before antiseptics scarcely occur now, yet the yearly mortality due to the disease, not only in this country but in all countries, shows a very unsatisfactory degree of diminution as compared with the results obtained by antiseptics in surgery.

Besides the fatalities a much larger number of grave cases short of death occur. It is impossible to compute this number accurately, but I believe it is not far from the mark to say that for every one woman who dies, four are more or less seriously ill, and besides these there are a very much larger number of cases of slight fever, often seen in lying-in hospitals as well as in general practice, nearly all of which are probably due to minor degrees of sepsis.

The obvious deduction to be drawn from these facts seems to me to be, that the antiseptic precautions in use up to the present time have been efficient in preventing that mode of infection in which septic organisms are conveyed from one patient to another, but that there is some other mode, far more common, for which they are inadequate.

#### FAECAL INFECTION.

Do organisms capable of producing puerperal sepsis commonly pre-exist in the woman? The answer is Yes; they can be constantly isolated from the lower bowel and perianal skin. The extensive study of infected gunshot wounds during the recent war showed that the more virulent bacteria isolatable therefrom were, in general, excremental in origin—that is, they were derived either from the individual's own faeces, or from the faeces of some other individual, or from the faeces of some animal in the form of manure.

It may be asked if it be true that the commonest cause of puerperal sepsis is faecal infection, why has so simple an explanation of the continued prevalence of the disease been generally overlooked till now? The answer is that the appreciation of the evil potentialities of intestinal organisms is of comparatively recent origin.

It occasionally happens that the obstetric surgeon has the opportunity of observing the processes of puerperal sepsis going on, so to speak, beneath his eye—namely, in cases in which a Caesarean section has perforce to be performed late in labour, when the uterus is already infected. Anyone who has had experience of post-operative sepsis in such a case, and compares the phenomena with those undoubtedly due to infection by intestinal organisms such as may be observed after operations for suppurative or gangrenous appendicitis, cannot doubt that the processes at work are due to faecal infection.

My argument, then, is that that method of infection of the birth canal wherein septic organisms are conveyed from individual to individual, has received disproportionate attention in the past, with the result that the antiseptic measures taught and practised to-day are framed and directed towards the prevention of infection from extrinsic sources, whilst the prevention of the more common type of infection—namely, that by organisms resident in the woman before the confinement—has received but little consideration.

#### HOW DO THE ORGANISMS GET INTO THE UTERUS?

The most obvious manner in which the organisms could obtain entrance into the uterus is that they should be carried directly there on hands and instruments. That this sometimes happens there can be no doubt, and it is especially dangerous when the introduction takes place after the expulsion of the placenta and membranes has left the uterine wall bare to direct infection. But in far the larger number of cases of puerperal sepsis no introduction of anything into the uterus has taken place, the most that could have happened being the implantation of organisms into the cervix or vagina.

It is therefore certain that organisms transplanted into or originally present in the vagina must in some way be transported into the uterus subsequent to the labour.

#### THE SITUATION OF THE ORGANISMS IN THE UTERUS.

The situation of the organisms by the time the symptoms of sepsis are produced is of the utmost importance in regard to curative treatment. It is quite rare, in a case of sepsis after full-time delivery, to find a definite mass of retained placenta. This does not apply to septic miscarriage in which retained portions of the ovum are quite commonly found; but the point is that uterine sepsis, taking all cases into consideration, both those after labour and those after miscarriage, occurs quite as commonly with a completely as with an incompletely emptied organ.

I press this point because the presence of retained placental tissue has been made a great deal too much of in the pathology of puerperal sepsis, chiefly owing to the docile acceptance by English obstetricians of the, I believe, totally erroneous assertions of certain German observers some twenty years ago, so that to day "something retained in the uterus," and "the germs that flourish on dead tissue" are stock clichés in the mouths of medical students and student-midwives, and are received as evidence of knowledge by their examiners.

The conclusion we reach, therefore, is that as matters stand to-day, prevention is to be more relied on than cure. The finding of the substance, whatever its nature be, that is the real antidote for puerperal sepsis is probably reserved for some laboratory worker of the future, but in the prevention of the disease every practitioner of obstetrics can take a hand.

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## EDITORIAL.

### THE ESSENCE OF GOOD NURSING.

It is well in adopting any work in life to keep definitely in mind what we should aim at achieving thereby, and every probationer who enters our nurse training schools should be helped to realise the objects of the instruction she will there receive.

Primarily, most girls enter upon a nursing career as a means of self-support, and it is a laudable object. But, when the decision has been taken, the aspirant for training must remember that she has chosen a career which, from some aspects is specially difficult, and requires special qualifications, natural and acquired. She will not have to deal with inanimate material which can be moulded at will, but with human beings, whose co-operation with her efforts for their welfare she must endeavour to secure, if the best results are to be obtained. She should therefore take every possible opportunity of studying human nature, for in the course of her work she will meet with humanity at its best and at its worst, and if she is to deal successfully with both, and with the large mass of people who come into neither of those categories, she must be a student, and a lover, of the human race, realising that it finds self-expression in a variety of forms, that "it takes all sorts to make a world," and that her sympathies should be wide enough to include them all. A real reverence for their humanity, whatever its outward manifestation, will be the greatest lever in her possession for raising it to a higher level in those instances where self-respect has been wounded, and she will be wise to adopt the poet's counsel:—

Then gently scan your brother man,  
Still gentler sister woman;

Though they may gang a kennin wrang,  
To step aside is human.  
One point must still be greatly dark,  
The moving why they do it!  
And just as lamely can ye mark  
How far, perhaps, they rue it.

So much for the general outlook of the nurse upon the human material. Her special attitude should be a passion for health as the birthright of every human being, and consequently, her fixed aim will be to aid in the prevention and cure of disease, in the relief of suffering, and the consolation of the sick and the dying.

In order that she may achieve these ends, she will set herself steadfastly to acquire knowledge, for the help that she will eventually bring to her patients will not be merely that of a person of good will, but of a trained and competent expert. That is what the public pay for, and have a right to expect. Ignorance in the untrained is to be expected, in the trained it is unpardonable and dangerous. And with knowledge as a basis she will spare no pains to acquire professional skill, including the gentle touch, deft manipulation, alertness in the observation of symptoms, sureness and swiftness in dealing with critical situations and emergencies, so that her confidence is infectious, and the patient is comforted and tranquilised. Consider this as an asset in successfully dealing with a sudden case of hæmorrhage, and many similar instances could be given.

To conclude: the essence of good nursing is to surround the patient with an atmosphere of comfort and tranquility, and with competent care based on knowledge. No pains are too great to acquire dexterity in manipulation and in the art of healing both mind and body.

## OUR PRIZE COMPETITION.

**WHAT MEASURES WOULD YOU TAKE IN THE CASE OF A WOMAN IN LABOUR SUFFERING FROM CONVULSIONS, PENDING THE ARRIVAL OF A MEDICAL PRACTITIONER?**

We have pleasure in awarding the prize this week to Miss Marian Gillam, 32, High Street, Newport-Pagnall, North Bucks.

### PRIZE PAPER.

Having despatched form for sending for medical assistance in accordance with Rule 20 and form 23 of the C.M.B. Rules, marked urgent, I should place the patient in bed flat on her back and head turned to one side, which allows the saliva and vomited particles of food to be posseted, safeguarding against asphyxia. Remove false teeth, if any, and place a gag between the jaws. A gag can readily be made of a piece of wood or the handle of a spoon, with a piece of old linen or handkerchief wrapped round. Carefully cleanse the mouth when necessary, and above all, watch and keep the woman from injuring herself. Ensure absolute quietness in the room, as the least noise may bring on another convulsive seizure. Allow a continuous supply of fresh air to enter without causing a draught; this can be assisted by withdrawing unnecessary occupants from the room. The convulsion will suggest to the nurse, either enclimptic or epileptic fits. In the former, sweating must be induced, so without delay, and with little disturbance and noise, apply hot blankets and bottles to the patient, exercising great care to avoid burns during unconsciousness. The progress of labour must be watched from time to time without undue exposure, and asepsis must be maintained as strictly as possible; susceptibility to sepsis is easily reached at this stage.

Be careful to note and record temperature, pulse rate, and respiration, also the number, character and duration of the convulsions. Try to procure specimen of urine—a sterile catheter should be ready to hand—should same be required. Notice urine, and whether the quantities be large or small, if passed unconsciously, and if any evacuation from the rectum; cleanse immediately for fear of introduction of germs into the vagina and uterus. Have in readiness a sufficient supply of hot and boiled water, in case a hot pack is prescribed by the registered medical practitioner, who may also require water for stomach wash out, large rectal saline, or intra-venous injection. A strong purgative (croton oil) or Pilocarpine H.I., may be given, also bromide of potassium; but these the medical man will prescribe.

The midwife should enquire tactfully from

the relatives present, the history of the patient. If she has had fainting fits before, or is subject to epileptic seizures; the patient will often omit to tell the midwife of the latter type when engaging her services. The two types of fits are distinguishable: in eclampsia the patient may complain of headache, loss of sight, dizziness, pain in the back, albumen may be in a large or small proportion in her urine, the amount of urine passed may also be diminished, or she may never complain at all, the first intimation of the condition being a fit, of which she may have as many as twenty, though generally about ten. In epilepsy, the fit is preceded by a cry or warning. Should consciousness return, plenty of fluids should be given, preferably hot milk; these will encourage the kidneys in their function and help to throw off the toxins. Over-anxious relatives should be suppressed regarding enquiries as to "How does the mother feel?" Should the medical practitioner be a long time in arriving, and the patient still unconscious, a hot pack could be given, also rectal saline  $\frac{1}{2}$  viii. The uterus and its contents must be carefully watched; it would be well to have douche can and nozzle in readiness, also ergot. The doctor, upon arrival, may terminate labour, and possibly post-partum hæmorrhage may follow, which also lowers the vitality and increases the risk of sepsis.

### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Catherine Wright, Miss Freda Wilson, Miss M. Thornton, Miss Y. Bevan, Miss J. Pepper.

Miss Catharine Wright writes:—"Endeavour to obtain a specimen of urine for testing, as it is in the kidneys that the toxic poison lies, and the percentage of albumen may be a valuable guide to the doctor. Await his orders for catheterization, as any undue disturbance may create a convulsion and increase the danger of sepsis, to which a patient in this condition is very prone. Do not leave the patient for an instant."

All the competitors assume that the question is one which concerns midwives, but we may point out that a maternity nurse may at any time be confronted with a case of convulsions pending the arrival of the medical practitioner, and should be able to distinguish between the different types, and to decide as to the immediate action to be taken.

### QUESTION FOR NEXT WEEK.

What are the principal drugs taken by drug addicts? What precautions would you take in regard to such patients, and what are the nursing points in caring for them?



## NURSING ECHOES.

A meeting of the Matrons' Council of Great Britain and Ireland will be held, by the kind invitation of Miss Winmill, the Matron, at Queen Mary's Hospital for Children, Carshalton, Surrey, on Saturday, 18th inst., at 3 p.m.

Tea will be served after the conclusion of the business meeting in the garden, if the weather is favourable, and the wards of the Hospital will be open to the visitors after tea. Members of the Matrons' Council are asked to notify Miss Winmill whether they hope to attend.

The monthly meeting of the London Branch of the National Union of Trained Nurses will be held on Saturday, September 11th, at 3 p.m., at 46, Marsham Street, S.W.1.

One can scarcely take up a paper nowadays without the question of the shortage of nurses cropping up. To mention a few instances.

Miss G. Wolseley Lewis, writing in the *Newcastle Daily Chronicle*, says in part:—

"Action and reaction are equal and opposite. I wonder whether this fact entirely accounts for the dearth of candidates for the nursing profession. During the war, from the countess to the kitchen-maid, everyone seemed to be engaged in some form of hospital work. Now, after two years of peace, the shortage of nurses throughout the country is a serious and urgent problem to those who are in any way responsible for the care of the sick. This shortage will be felt even more when the Ministry of Health is fully organised, and when many posts dealing with preventive work all over the country will be open to members of the nursing profession.

"The work should appeal to women of education, seeing that it is a work of national importance. Nothing can be more essential than the health of the people, and as medicine becomes more and more preventive as well as curative, nursing follows in its steps.

"Almost all professions are now open to women, but I believe nursing is the one which will be found to be the most satisfying, and also the one in which there is the best chance of excelling. My reason for saying this is that no other work that a woman can undertake appeals so naturally to the maternal instinct implanted in us. Nursing is work eminently worth doing, and it will be a great loss, if, just at this juncture, there is any shortage of capable well-educated women to fill the ranks of the profession."

At Hayes, Middlesex, the Rector, the Rev. E. R. Hudson, who presided at a meeting of subscribers convened to consider the position

in regard to the Hayes District Nursing Association, said:—"We are without a secretary; most of the lady members of the committee have resigned; we have no treasurer, and are without a nurse. It must be for the trustees now to deal with the matter. I think it is far better for us to finish with it. It is impossible to continue the Association in its present form."

Ultimately a resolution was passed stating the opinion of the meeting that it was impossible to work the Association any longer on the lines hitherto adopted, and suggesting that the trustees be requested to inform the committee what steps should be taken to bring the work of the Association, as at present constituted, to a close.

At Chatburn, where evidently the resident nurse system has been the rule, Mrs. Assheton, President of the Chatburn Nursing Association, occupied the chair at an adjourned meeting, and said that it was quite out of the question to continue the present system. Nurses absolutely refused to take up that kind of work. They would not do housework and live in, desiring rather to do district work. Another member of the committee stated that headquarters were unable to offer any suggestions. A resolution was carried to dissolve the Association.

The alternative of providing a district nurse was considered, the chairman expressing the opinion that "a district nurse was better than no nurse at all," and that "the difficulty was in getting a woman to do the skilled work as well as the housework," and it was resolved to form a district nursing association providing that ways and means could be found, but after further discussion a resolution was carried that "as there did not appear to be any ways and means the scheme be allowed to lapse for the present."

At Stroud, Miss Berks, the Superintendent of the Stroud and District Nursing Association, has resigned this position, which she has held to the satisfaction of all concerned for twenty-one years. Recently, in addition to district nursing and child welfare work, there has been added a scheme of school inspection and health visiting under the County Council. After endeavouring to work the scheme, it has been found that the additional duty exacts too much from the nurses, who have also resigned, thus bringing the work to a close, which is very regrettable from every point of view.

## THE SOCIAL, ECONOMIC AND EDUCATIONAL STATUS OF THE NURSE.\*

[ABRIDGED.]

By RICHARD OLDING BEARD, M.D.

*University of Minnesota, Minneapolis, Minn.*

It is fitting that words of cheer and messages of special meaning should be addressed directly to you on a day like this, when you are completing one of the critical periods of your personal history. Yet the particular word I have to bring you is so big with cheer, the message that I carry is of so deep a meaning that I would fain extend it to all the people of your community and to all the members of the profession you are about to enter.

Three years of preparation which you have faithfully followed, which your instructors have faithfully directed, should have made you fit for responsibility, ready for opportunity; but have they, perhaps, revealed to you the largeness of the responsibilities, the scope of the opportunities that await you? Do you realise the new social sense that is being born in the consciousness of human society, the new appreciation of age-old values that has come in our day?

The world war has been a great awakener. The awful experiences of half a decade have stabbed the spirit of men broad awake. Ears that had been deaf to half a century of counsel from the world's great teachers have been unstopped. Eyes that had been held to the dead level of economic achievement have been opened as on the Mount of Transfiguration to see visions. The thoughts of men, narrowed to the concerns of self, to the insularity of national affairs, have been suddenly widened to the embrace of humanity. The hands upon the clock of civilisation have not been turned back, even though the earthquake shock of the most frightful of wars has stood them still.

### THREE GREAT PROBLEMS.

Among the immediate results of this war, three great problems stand out to focus the attention of men and women—problems in the solution of which your profession and mine are equally concerned, in which, indeed, all the agencies of human betterment are enlisted. May I ask you to think of these. They are: (1) The worth of human life; (2) the conservation of human health; (3) the religion of social justice.

#### 1. *The worth of human life.* "Life struck

sharp on death makes awful lightning," and when that glare is intensified by the multiplication to millions of sudden deaths, it illuminates the value of all life. This generation of thinking men and women will not lose within their lifetime the memory of that fearful light. It is not a happy thought that the cutting off of the young manhood of the nations should be necessary to enhance the worth of the thing so recklessly sacrificed; but certain it is that human society has suddenly become impatient of its loss, that it cherishes a new sense of the value of the human asset, that measures for the extension of human life meet with a ready response in the minds of the people. And they are measures quite possible of application. They involve a revision of the methods of our living from the cradle of the womb to the threshold of the timely grave. Pre-natal care, infant welfare, child protection, school nursing, health insurance, accident prevention, personal and communal hygiene, are each and all the expressions of an intensified appreciation of the thing we call life.

2. *The conservation of human health* is the necessary corollary to the preservation of human life. It is embodied in the principles of preventive medicine, the practice of which is undoubtedly destined to be the medicine of the future. It will not long remain the business of your profession or mine to cure, but to control the causes of disease; it will not be ours merely to restore, but, instead, to conserve health. All the agencies I have named as preservative of human life are means addressed also to this end. For the real value of life is conditioned upon the measure of health, and these agencies represent the opening of so many new fields of social endeavour for the nurse. And what concern will these larger efforts for the conservation of human health have for you?

3. To serve well, to the help and the saving of the lives, and the health and the happiness of men, you must have within you the passion for social service, *the religion of social justice*, the last of the three great ideas which are so greatly engaging the interest and commanding the devotion of the best lovers of their kind to-day.

In its ultimate end, its highest expression, yours is a profession of service. If it is not that, then it is merely a trade, and among the meanest of trades, because it trades upon the misfortunes of others. But to serve as the mechanism, the medium of social justice: to seek to level up the scales of opportunity which have swung so beneficially for the few, so.

\* An address delivered at the Lakeside Hospital, Cleveland, O., May 26, 1920.

unequally for the many; to hold out to the unfortunate, whether unfortunate by their own failure or their own fault—it matters not, the hope and the realisation of the hope of life, more life, and fuller life; to offer to them the health and happiness and the development of soul and mind and body which health potentialises, to help make them economically efficient—and self-dependent; to point to and set their feet upon the upward path, is “an errand all divine.” But it is an errand for which you must have not only the will, but the essential fitness. Whether you serve in the home or in the school, in the industrial or the commercial field, in the rural community or in the specialised agencies of civic nursing, in the direction of other workers, or in the teaching of other nurses, you must be fittingly trained and you must carry with you the guarantee of fit training. These two essentials, a fit training for the nurse, and a guarantee that she has had it, for the benefit of the public—give me the text of the chief message that I want to bring to you to-day.

I have marvelled, again and again, over the story of the struggle into existence of the profession of nursing, a struggle under the two heaviest of handicaps, the lack of public recognition and the lack of public support. It has been a remarkable evolution and none the less remarkable because the elements which have gone into its making have been crude. The nurse of the past generation with all her certain limitations, has served her day faithfully and well.

#### SCHOOLS OF NURSING.

Nevertheless, the fact remains that neither the schools of nursing nor their teaching product have been invariably and altogether fit. The fact remains that the great majority of the schools exist still, not because their pupils have need of them, but because the hospitals to which the schools are attached need their pupils. They teach and train nurses, not for the primary ends of education, but for the benefit of the hospitals in which nurses are trained. The relationship is an abnormal one and it is so because it rests upon two fundamental mistakes—the mistake that the hospital is a public benefaction and as such is entitled to private support, either in money or in service, and the mistake that the hospital has, in itself, a teaching function that it can fitly exercise.

The training of nurses, whether in undergraduate or graduate courses, needs to be standardised. Only as it is standardised under recognised authority, does it afford to

the public any guaranty of its adequacy. It can be standardised in only one way, by association of the school of nursing with an educational institution of high order which assumes direct responsibility for the teaching. The hospital, when the school has come into proper alliance with such a teaching institution, falls into its place as the well-conducted laboratory of the nurse in training.

#### THE UNIVERSITY EDUCATION OF THE NURSE.

The day of the university education of the nurse dawned eleven years ago. It has been a slow dawn and the sun of that day rises slowly still, but surely, towards its zenith. Memory rekindles in me an event that signally marked that dawning. Eleven years ago this coming month, it fell to my fortunate lot to address a joint meeting of the Superintendents' Society and of the Nurses' Associated Alumnae assembled in Minneapolis. I recall the great audience chamber, crowded to capacity, I have a sense still of the sea of interested faces upturned to the speaker's desk—but I have a distinct consciousness of one face, the face of the late Isabel Hampton Robb, aglow with the fervour of her own deeply aroused feeling. As I announced in the course of that address upon the University Education of the Nurse that the University of Minnesota had approved the organisation of the first university school of nursing established anywhere in the world, and as the rest of that great gathering rose to its feet in glad acclaim of the good news, she sat there and her tears flowed, not hidden tears, tears of joy that the dream of her life for the education of women in nursing was about to be realised. As she wrung my hands at the close of that meeting she said: “I was not ashamed that you should see me cry; my tears came from a deep well of gratitude.” And I did not forget that it was she who, as head of the Johns Hopkins School, many years before, had first stirred in me a living, working interest in the education of nurses. In the annals of the profession of nursing should be enrolled in golden letters the name of Isabel Hampton Robb who, more than any other, inspired the organisation of nurses in America and gave to that organisation an abiding sense of the educational future of the nurse.

#### HEARD IN THE WARDS.

*Visiting Surgeon to Patient:* Well, how are the eyes getting on? Can you see nurse any better?

*Patient:* Yes, Sir. She gets plainer and plainer every day.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

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## SUMMERTIME IN THE ISLES OF THE MIST.

Drifting rain and a wind from the northern sea. Not just the weather, perhaps, which you would choose to take a "joy ride," in a strange, jolting old char-a-banc, in a country where great mountain peaks soar into the clouds, peaks where eagles dwell and from which wild cataracts dash. A drive over a hill road, made rough by the storms, a road now skirting dark echoing cliffs, now crowning the steep banks of some moorland loch, no such expedition had been in our thoughts when we started to stroll up a street in Stornoway with its low houses on one side, their windows—one and all of them—secured from within by gorgeous masses of blossoming geranium, while, on the seaward side of the street, stood rows upon rows of herring barrels, into which strong limbed fisher lassies packed the last night's harvest of the sea. Then our glance fell on the rough motor char-a-banc rapidly filling with fisherwomen and folk from the crofts which lie scattered about the Island. Did it not offer just the opportunity for adventure? On interrogating the driver we ascertained that he was setting out on a drive which was to cover fifty miles, and in a moment we were struggling for the empty seats. A ruddy old Yorkshireman brought up the rear of our party; he was heedless of the expostulations of his daughter and her reiterated reminders of his proneness to contract pneumonia. With the air of a schoolboy intent upon some particularly reckless prank, this valiant old rebel against petticoat government climbed jauntily up beside the driver, thereby scoring over the rest of his party for, when the two long seats in our chariot were packed, the remaining passengers, without an instant's hesitation, proceeded to form two fresh tiers of seats by the simple expedient of establishing themselves on the laps of those who had first got in, refraining however, much to our relief, from enforcing our hospitality in this matter. But, nevertheless, we were soon packed together as closely as the unfortunate occupants in the barrels across the street, and it was indeed a release when, after covering a distance of twenty miles or so, the car began to stop at frequent intervals to allow first one and then another of our fellow travellers to alight. But

we were to learn later that overcrowding has, on occasions, certain advantages, for the char-a-banc, in the character of a "returned empty" (or nearly so) rivalled in its vagaries the behaviour of our boat some days previously when it passed through what, to many an Englishman, is a sea of sad memories—the Mull of Kintyre.

But any discomfort was forgotten before we had lost sight of the thatched and red tiled roofs of the town of Stornoway, forgotten in the wonder that lay spread before us as we climbed the long hill track, for it was little more, which lay marked out for us, across the moorland, by occasional stacks of peat set down here and there, for convenient cartage, where the heather meets the roadland. Once more we were in that unrivalled country "where peesweep, plover and whaup cry dreary," where lie old battle-lands of the Clans and the Norsemen, where hills stand like vast giant castles of gloom, which yet, at some other time, when they are kissed by the sun, reveal the greenest of grassy slopes, corries and fells, wherein find shelter, wild flowers as delicate in form and colour as any in your Southern lands.

Ere we had gone a few miles we were in a veritable fisherman's paradise. No sooner was one inland loch passed than another lay spread to right or to left, and every time we passed one of those sheets of water, beneath the towering hills and heavily fringed by its banks of heather, a man, hugging a fishing rod, would look round at us with shining eyes and not one among us could refrain from an answering smile. Half an hour ago we were unaware of his existence but, thanks to his winsome companion, peeping from its old grey case, and to those elusive feather-bedecked little hooks in his hat, we were all of us friends in a moment. This astute looking lawyer from the Scottish capital told us in a few words half his personal history. He, a Welshman, had met his wife first in the highlands, now she was on a visit to her old home and he was going to join her, there. He was to spend three weeks among the hills. "Did not we pity him?" he asked with a laugh, which indicated that to do so would be the last absurdity. Miles farther on he jumped from the car with a shout like a schoolboy's, and gripped the hands of a stalwart highlander at the door of a roadside house. All his luggage except the fishing rod was forgotten; but Jehu was equal

to the occasion and, very much in the tone he might have used in speaking of a lunatic, explained "He's but a Sassenach" (south country) fisherbody," tossed coats, bags and fishing basket into the road, and without more ado we continued our journey.

But before "the Sassenach" reached his destination we had to cover a score of miles or more of the most beautiful scenery imaginable—that is for those who love the wildness of the highlands. Nothing could surpass the grandeur of the hills rolling back from the purple moorland, the deep lochs, the streams rushing over their rocky beds, while the thick, drifting rain seemed but to add to the feeling of grandeur and desolation. Here and there we would come upon a lonely shieling built of stones brought down by the torrents, thatched with heather fixed on by strands of rope fibre. These lengths of rope were a couple of feet apart and kept in place by a heavy stone hung to each extremity at the eaves. Occasionally a flock of wildfowl would fly screaming overhead as we reached the wilder districts, and many a rabbit scampered by, overcome by the fearsomeness of our noisy chariot. Now and again dimly out of the mist a horse and cart would come in sight on the crest of the road and it was the business of its driver to choose the first opportunity that offered to back his horse into the heather at some point where the bank of the road was less steep than usual, in order to allow our bulkier vehicle to pass by. More than once, as we rolled along the road we were suspicious that Jehu took a secret pleasure in running the wheels of the car as close to the precipitous banks of the roadway as possible until, when our car flew round a corner, in close proximity to one of the lochs, our Yorkshireman sprang to his feet in protest, imploring the driver to "have a care." Before the latter could answer the car came to a standstill and refused to move. Then did Jehu turn to us with unmoved countenance. "Ye'll a' hae tae get oot. She's sinkin'," said he. "My friends warned me that I might sink in the Mull of Kintyre," said a Glasgow lady, "but forgot to warn me of a similar risk on the King's highway." However, Jehu literally put his shoulder to the wheel and we were off again through a small hamlet with peat smoke rising from primitive chimneys and we admired the clean and lively little bare-footed children who came to stare at us from the low, dark doorways. The way home lay over miles and miles of road winding rather monotonously over the moorland this time, for the hills were now in the far distance and not a tree did we see in all the fifty miles. Sometimes our kindly Jehu would stop and give "a lift" to a wayfarer, most often a woman carrying her boots in her hand, as the custom is in Lewis. One rosy youngster climbed up with his mother and, by way of making conversation, we asked what his name might be. "He has not the Gaelic," explained his mother, "but his name it will be Colin Alastair Macdonald." Highland enough it was, but nevertheless Colin Alastair was something

of an alien, for is not Lewis Macleod land? Later we persuaded Jehu to allow us to explore the old burial ground of the Macleods, with the ruined walls of an old-time church standing about twelve feet from the shore. We saw almost nothing, however, of the ancient graves of the clansmen, for, with the exception of the chiefs alone, they were hidden in a growth of nettles that reached to our shoulders.

As we neared Stornoway again an argument as to the time of day arose with Jehu, and, puzzled, we inquired at last whether his was summer time. "It is God's rale (real) time," replied he severely, "not Lloyd George's time," and he cast upon us Southern sinners a glance that made us hide our faces from him—maybe because he had brought home to us our responsibility for upsetting the cosmic order of things; maybe because we laughed at sober things. With solemn countenances we strolled back to the boat for one of us had remembered the confusion of a Sassenach who, strolling through Stornoway on a Sabbath morning, was "warned" by a policeman and on inquiring wherein he had transgressed, was told "Ye're lookin' happy an' this is the Sawbath day."

I. M.

## CORRESPONDENCE.

### PRIVATE NURSING.

To the Secretary, R.B.N.A.

DEAR MADAM,—I suppose that we shall commence having conferences again in the autumn. They were most interesting last year, but I noticed that among the varied subjects on which papers were read Private Nursing did not have a place. Would it be possible to arrange to have an address and discussion on such a subject in the coming autumn? I am sure that it would be helpful to many nurses. We liked very much a paper on Private Nursing which was read at a big Conference held by the Corporation a few years ago, but many developments have taken place since then, and there are points about the employment of Registered Nurses and in connection with the Hours of Employment Bill which it would be useful to discuss either after the paper is read, or over one of our Scotch teas after the meeting. Please see what you can do.

Yours sincerely,

C. LIDDIATT.

[We shall have pleasure in arranging a Conference on the subject suggested. It ought, as Miss Liddiatt indicates, to prove most useful, and there is need for private nurses to turn their attention to the matter of fostering this very important branch of their Profession. We shall be glad to hear from any nurse who will undertake to read the paper, and also from others prepared to take part in the discussion.—I.M.]

ISABEL MACDONALD,

Secretary to the Corporation.

10, Orchard Street, W. 1.

## APPOINTMENTS.

## MATRON.

**East Riding Mental Hospital, Beverley.**—Miss Agnes Y. Brodie has been appointed Matron. She was trained at the Infirmary, Kilmarnock, and has held the position of Nurse at the Royal Asylum, Aberdeen, and the Infirmary, Kilmarnock, and of Assistant Matron at the District Asylum, Inverness.

**Wolverhampton and Midland Counties Eye Infirmary.**

—Miss M. J. Connell has been appointed Matron. She was trained at the Royal Infirmary, Sheffield, and has held the position of Sister at the General Hospital, Burton-on-Trent, the Stanley Hospital, Liverpool, the Royal Westminster Ophthalmic Hospital, London, and of Matron of the Wolverhampton and Midland Counties Eye Infirmary. During the war she served at home and abroad as a member of the Territorial Force Nursing Service. She has also worked as a School Nurse under the Northampton Borough Education Authorities.

**Passmore Edwards Hospital, Bounds Green Road, New Southgate, N.**—Miss Elizabeth Martin has been appointed Matron.

## NURSE MATRON.

**Joint Sanatorium, Elgin.**—Miss J. Bayne has been appointed Nurse-Matron. She was trained at Shotts County Hospital, Lanarkshire, and has held positions of responsibility at the Crumpsall Infirmary, Manchester, and the County Hospital, Motherwell, and is at present Sister-in-Charge of the Glenalmond Sanatorium, Kinross. During the war she worked in Serbia as a member of the Scottish Women's Hospitals

## ASSISTANT MATRON.

**Isolation Hospital, Roman Road, East Ham.**—Miss A. F. Hindle has been appointed Assistant Matron. Miss Hindle was trained at the North Staffordshire Infirmary, Stoke-on-Trent, and has been Theatre Sister at Stockport Infirmary, Ward and Theatre Sister at the National Hospital, Queen Square, Bloomsbury, Night Superintendent at Charing Cross Hospital, and Assistant Matron at the Cumberland Infirmary, Carlisle.

## HEALTH VISITOR.

**Staffordshire County Council, Lichfield.**—Miss Eileen Crowe has been appointed Health Visitor. She was trained at the Royal Victoria Hospital, Belfast, and the Clapham Maternity Hospital, and subsequently held the position of Sister at the Ulster Volunteer Force Hospital, Belfast. During the war she did Military nursing both at home and abroad, and on a hospital ship. She holds the Health Visitors' certificate of the Sanitary Institute and is a certified midwife.

**QUEEN VICTORIA'S JUBILEE INSTITUTE.**

Miss Alice A. Brown is appointed to Somerset as an Assistant County Superintendent; Miss Esther Corlett to Manchester (Salford), as Assistant Superintendent; Miss Edith E. Kaye to Mytholmroyd; Miss Florence J. I. Knight to Newport (Isle of Wight); Miss Georgina MacWilliam to Ardsley; Miss Belinda A. Regan to Morecambe; Miss Albertha R. Shoesmith to Bryanston.

## THE PASSING BELL.

We record with deep regret the death of Miss Margaret E. Howes, at one time Matron of the General Hospital, Cheltenham, a position she resigned for service with the Universities' Mission to Central Africa, in connection with which she worked at the hospital in Zanzibar, and elsewhere in the Zanzibar diocese from 1899-1907, when a severe illness necessitated her retirement. Since then she has held various positions at home.

## THE ROYAL RED CROSS.

It is officially announced that, with a view to facilitating the more rapid distribution of War Decorations, no more recipients of the Royal Red Cross, (Second Class), or of certain other decorations, awarded in connection with the war will be summoned to an Investiture held by the King personally.

Any lady who has been awarded this decoration will have the option of receiving it at an Investiture in the county in which she resides, or of having it sent by post. The County Investiture referred to will be held by the Lord Lieutenant, but only if it is found that a sufficient number of recipients desire to be present at the ceremony.

Any lady whom this notice may concern is requested to apply in writing to the Secretary, C.2, Investitures, War Office, Whitehall, stating whether in the circumstances she wishes to receive the insignia by post or at a County Investiture. She should also give her full name and postal address (specifying the county) and particulars of her service by which she can be identified.

## THE ROYAL SANITARY INSTITUTE.

The autumn courses of lectures and practical demonstrations for Women Health Visitors and Child Welfare Workers, and for Sanitary Officers, organised by the Royal Sanitary Institute, 90, Buckingham Palace Road, S.W.1, begin on September 24th and September 20th, respectively. Examinations will subsequently be held at provincial centres as well as in London.

The fee for the complete course, in either case, is £5 5s, or for Part 1 £3 13s. 6d., for Part 2 £2 2s. Members and Associates of the Institute, of two or more years' standing, and who have paid their subscriptions, can be supplied with tickets of admission to the Course at the reduced rate of £2 2s.

Students who enter their names for one of the Examinations of the Institute at the time of taking their ticket for Part 1 only, or for the complete course, can have 10s. 6d. carried towards their fee for examination. The standard examinations of the Institute are recognised in all parts of the British Empire.

These training courses are of particular interest just now when so many educated women are being appointed on the staff of Public Health Authorities, and the demand for trained women appears to be increasing.

The training not only includes lectures but practical demonstrations in the Museum of Sanitary Appliances, visits to public works and other places of sanitary interest, and the use of a Reference Library, Lending Library and Reading Room.



## WAITING THEIR CALL TO REST.

Some of our readers may not be acquainted with an institution that is doing an excellent and charitable work—namely, the Hostel of God, situated on Clapham Common. It exists for the care of the dying, and is managed by the religious order of St. Margaret's Sisterhood, East Grinstead. The Hostel is located in one of the many beautiful houses that are to be found on the north side of Clapham Common. It is detached, double fronted, and possesses a very charming old garden the lawn of which is shaded by cedar, copper beech, and tulip trees. In this pleasant and restful spot the patients lie when they are able, on long chairs and couches, or in an open fronted shed when the weather is bad. In another part of the garden stands the little mortuary at the back of which is a beautiful carved stone representation of the Virgin Mother embracing the body of her dead Lord.

The interior of the house shows a wide hall and very fine oak staircase and balustrade.

The accommodation is for twenty-seven patients. The wards are coloured in a pretty shade of blue washable distemper, and the women's beds have spotless white curtains at the head which secures a certain amount of privacy. They are kept gay with flowers, and the south aspect secures the necessary sunshine and brightness.

The men's ward has recently had a bay added to it in memory of Dr. Mackintosh who was the first doctor in attendance at the Hostel. This addition not only provides for more beds, but also gives more light and air to the ward.

There is one single and one double bedded room.

Everything that is humanly possible is done at the Hostel, both for the souls and bodies of these, "who to the margin come, waiting their call to rest."

There is a beautiful little chapel, and the Hostel has its own chaplain who can be summoned at any moment to minister to those *in extremis*.

The nursing is done by the religious Sisters who are also trained nurses, and they are assisted by probationers. The Hostel is entirely free, no payment of any sort is asked, but donations from the friends of the patients are of course welcomed if they feel disposed to give. It is supported by voluntary contributions. As may be imagined, the Hostel has a considerable waiting list.

Such a good work as this is deserving indeed of the support of the charitable, and it is an example which benefactors might well copy, as we believe Homes in existence for this purpose are very few and far between.

Mr. Moss, head porter of the Suffolk and Ipswich Hospital has been made a Governor of that Institution. He has served it faithfully and well, and has won deserved popularity with the thousands of patients who have attended it during his term of office. For many years he has had the ambition to become a Governor, and he has collected and handed over to the authorities a sum exceeding £50.

## LEGAL MATTERS.

### THE LABEL ON THE BOTTLE.

Several lessons, which cannot be too emphatically emphasised arise out of a mistake which occurred recently at the Buchanan Hospital, St. Leonards, which resulted in the death of two patients.

The facts as elicited at the inquest, and reported in the *Hastings and St. Leonards Observer* are:—

Two patients attended at the Buchanan Hospital, St. Leonards, on July 30th, and were X-rayed. The first patient was a man of 77 who had been under the care of Dr. James Lee (the surgeon to the Buchanan Hospital), for over a month. He formed the opinion that an X-ray photograph should be taken, and on July 30th directed the Sister-in-Charge of the X-ray room at the hospital to give a bismuth meal for the purposes of the X-ray.

### THE DANGER OF IGNORANCE.

The Sister deposed that she took the bottle (produced) from the cupboard, weighed out four ounces, and added malted milk. That was the first time the bottle had been used. She did not notice that it did not bear a label "bismuth," but "barii carbonate." Even if she had she would have used it, because she did not know the difference.

Replying to the solicitor representing Miss Constance M. Locke, the dispenser, she said that she remembered a conversation with her as to the substitution of barium sulphate for bismuth. She asked Miss Locke to order the former, but she said she could not do so unless she had permission. Later Miss Locke said she had had a conversation with the representative of the British Drug House, who said that barii sulphate was used largely, and she had ordered a bottle. About a week later she brought the bottle (produced) into the X-ray room for the witness to see.

### THE PRICE OF CHEAPNESS.

The dispenser gave evidence as to ordering the barium, as it was cheaper than bismuth. The list was signed by Dr. Ethel Lee, and she also went over it with the representative of the British Drug House who made no comment on it. She had no knowledge of these compounds of barium, which were rather out of the line of an ordinary chemist. She must have noticed in the catalogue, that it was sulphate which was marked for X-ray diagnosis and not carbonate.

### DEATH FROM POISONING.

Dr. James Lee deposed to finding the deceased very ill on the afternoon the photograph had been taken, and to calling in Dr. Prichard in consultation. They decided that the only chance of saving his life was an operation, and this was begun at St. Elizabeth's Nursing Home. The patient died shortly after the operation had commenced. He was then prepared to certify

death due to shock, but in view of the fact of another death he came to the conclusion that death was due to poisoning.

Mr. George Henry Howe, surgeon, who deposed that a post mortem examination showed a malignant growth in the gullet, said that on the inner surfaces of the stomach there were fresh ulcers attributable to the barium. The cause of death was poison, accelerated by the malignant condition of the deceased's organs.

In the second case the Sister deposed that she gave the deceased a preparatory meal at two o'clock, and wished to X-ray him four hours later. He returned about five looking very ill. She X-rayed him and found barium in the stomach, and in view of his condition put him to bed. At this time she thought he had taken a chill, as he had been without food all day for the purposes of the X-ray. He was seen by Dr. J. Lee and Dr. Pritchard. The composition of the meal was suspected, and she was going to take a sample to send to the analyst when she saw that the label on the bottle did not say sulphate.

Mr. George Henry Howes deposed to finding in the stomach, on post mortem examination, what appeared to be barium carb. The cause of death was shock, due to poisoning.

The Jury returned a verdict of death from misadventure.

#### THE SAFETY OF PATIENTS.

Two rules are impressed on nurses during their training—(1) Never to administer a drug to a patient which has not been prescribed by the medical attendant, (2) Always to look at the label on the bottle before giving a dose. These rules are made for the protection and safety of the patients, and the facts above related prove their wisdom and necessity.

It does not appear, further, that the medical staff of the hospital were consulted before it was decided by the dispenser, on the recommendation of the representative of a drug company, to order a substitute for bismuth on the score of cheapness.

In the first case under consideration the Sister stated in evidence that she was directed to give a bismuth meal, she did not notice that the bottle did not bear the label bismuth, but barii carbonas, and added that if she had noticed she would still have used it because she did not know the difference.

The accurate administration of prescribed drugs is often, as in the present instance, a matter of life and death to patients.

It is highly desirable that nurses should have an elementary knowledge of the drugs they are handling, but, whether or not, it is inexcusable when one drug is prescribed to administer another, and the terrible results of so doing in the present instance afford a lesson which we hope all nurses will take to heart.

Dr. Letitia Fairfield has succeeded Miss S. A. Villiers as Chairman of Executive of the League of the Church Militant.

## A GREAT DAY IN U.S.A.

The Proclamation declaring woman suffrage to be established as the 19th amendment of the Federal Constitution was issued on August 26th.

## BOOK OF THE WEEK.

### "BULLDOG DRUMMOND."\*

"Captain Hugh Drummond, D.S.O., M.C., late of His Majesty's Royal Loamshires, was whistling in his morning bath. After a while the whistling ceased, and the musical gurgling escape of water announced that the concert was over. It was the signal for James Denny, the square-jawed ex-batman, to disappear into the back regions, and get from his wife the kidneys and bacon which that excellent woman had grilled to a turn."

But this morning James Denny was preoccupied by the number of letters that awaited his master.

"Forty-five," he said grimly.

He picked up a newspaper lying on a chair, and indicating a paragraph with a square finger, thrust the paper under his wife's nose.

"Them's the result of that," he said cryptically.

"Demobilised officer," she read slowly, "finding peace incredibly tedious, would welcome diversion. Legitimate, if possible, but crime, if of a comparatively humorous description, no objection. Excitement essential.—Reply at once, Box X10."

A moment later Hugh came in. Slightly under six feet, he was broad in proportion. His best friend would not have called him good-looking, but he was the fortunate possessor of a cheerful type of ugliness which inspires immediate confidence for its owner. In fact, to be strictly accurate, only his eyes redeemed his face from being what is known in the vernacular as the "Frozen Limit."

After sorting, with the aid of Denny, the numerous replies, he decided to enter into negotiations with a correspondent who, among other things, said she was "up against it, and for a girl I have bitten off more than I can chew. Will you come to the Carlton to tea to-morrow afternoon? I want to look at you and see if you are genuine."

If the reader has been able in these few lines to get even an inkling of Hugh Drummond's character, it is needless to relate that he kept the appointment punctually. His rhapsodies to James as to the probable pleasing personality of his unknown correspondent were not exaggerated.

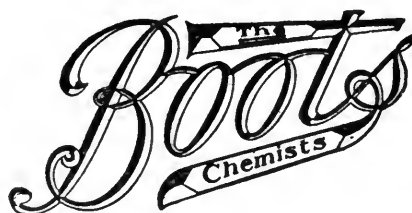
Her eyes, he could see, were very, very blue; and she had great masses of golden-brown hair coiled over her ears. He glanced at her feet, being an old stager; she was perfectly shod. It was sufficient to make him bless the moment when, more as a jest than anything else, he had sent his advertisement to the paper.

From that moment onward Hugh is involved in

\* By "Sapper" (Cyril McNeile). (Hodder & Stoughton.



**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.



**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

excitement enough to spread over the lifetime of fifty men.

Of course the whole book is wildly improbable and impossible, but it is none the less absorbing on that account; indeed on these occasions fiction outdoes truth by a long way.

The result of Hugh's interview with this charming girl, Phyllis Benton, was that the next morning he told James:

"I almost think I could toy with another kidney. Do you think it will cause a complete breakdown in the culinary arrangements? I've got a journey in front of me and I require a large breakfast."

"Will you be motoring, sir, or going by train?"

"By car," answered Drummond. "Pyjamas and a tooth-brush."

Perhaps it would be as well to give our readers the summary of the case that Hugh gave to his batman.

"Listen, James! Either I'm a congenital idiot and don't know enough to come in out of the rain, or we've hit the goods. That is what I propose to find out by my little excursion. Either, my friend, our legs are being pulled till they will never resume their normal shape, or that advertisement has answered beyond our wildest dreams."

"The maiden lives with her papa at a house called the Larches, near Godalming. Not far away is another house, called the Elms, owned by a gentleman of the name of Lakington—a nasty man, James, with a nasty face."

"Miss Benton accuses Mr. Lakington of being the complete IT in the criminal line."

"Indeed, sir; more coffee, sir?"

"Will nothing move you, James?" said his master plaintively. "This man murders people and does things like that, you know. Keep quite still, or I shall get it wrong. Three months ago there arrived at the Elms the most dangerous man in England—the IT of ITS. He owns a daughter. From what Miss Benton said I have doubts about that daughter, James—grave doubts! It appears that some unpleasing conspiracy is being hatched by IT and the IT of ITS, into which Papa Benton has been unwittingly drawn."

"As far as I can make out, the suggestion is that I should unravel the tangled skein of crime and extricate papa."

In a spasm of uncontrollable excitement James sucked his teeth.

"Lumme, it wouldn't 'alf go on the movies, would it?" he remarked.

Hugh's immense resource, physical strength, and wit stood him in good stead in his blood-curdling adventures, and the author's capacity for original and thrilling situations would be hard to beat.

Readers whose literary tastes are a trifle jaded cannot do better than sample this pick-me-up. Not the last thing at night, though! H. H.

#### COMING EVENTS.

September 11th.—National Union of Trained Nurses. Monthly meeting. London Branch, 46, Marsham Street, S.W.1. 3 p.m.

September 18th.—Matrons' Council of Great Britain and Ireland. Meeting, by invitation, at Queen Mary's Hospital for Children, Carshalton. 3 p.m.

#### LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

#### THE CASE OF THE ELDERLY NURSE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—I quite agree with your correspondent on the above subject in to-day's BRITISH JOURNAL OF NURSING. I cannot claim such a long nursing record as the writer, but already I find I am looked upon as a "back number" by the younger members of our profession. It is difficult to arrange to take a post-graduate course for many of us who have home ties; but there are some, like myself, who would like to work in a modern hospital for a short period in order to rub up some special treatments. I took my midwifery training ten years ago, and should feel most grateful for a fortnight's instruction in a midwifery ward any time between September 20th and December 1st.

Do you know of any institutions which would be willing to open their doors to any of us in the above way, who still feel they have something to learn?

I am, &c.,

AN UP-TO-DATE BACK NUMBER.

#### REPLY TO CORRESPONDENT.

An Inquirer.—We shall be glad to answer Inquirer's question if she will send us her name and address, not for publication, but in accordance with our invariable rule.

#### KERNELS FROM CORRESPONDENCE.

Churchwoman.—Delighted to see article on "The Order of Deaconesses" in B.J.N. There has been no other article in the press, so far I have seen, so informative on this important subject.

School Nurse.—The possible connection between fleas and scarlet fever mentioned in the JOURNAL this week is most interesting. Why not? I hope you will tell us more about this.

#### OUR PRIZE COMPETITIONS.

##### QUESTIONS.

September 4th.—What are the principal drugs taken by drug addicts? What precautions would you take in regard to such patients, and what are the nursing points in caring for them?

September 11th.—Mention any two surgical conditions which may follow infectious diseases. Describe fully one of them. If an operation should be necessary describe in detail how you would prepare the patient.

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### LIST OF SUCCESSFUL CANDIDATES.

At the Examination of the Central Midwives Board, held in London and the Provinces on August 4th, 1920, 867 candidates were examined, and 717 passed the examiners. The percentage of failures was 17.3.

#### LONDON.

*British Hospital for Mothers and Babies.*—L. Keys, E. Shepherd, L. B. Wigan, A. Wilkes.

*City of London Maternity Hospital.*—E. Barton, J. C. Berkeley, E. M. Halliday, G. Jeffery, J. D. Jones, M. B. J. Maggs, M. E. Read, C. L. Shann, E. Thomson, E. E. Wooller.

*Clapham Maternity Hospital.*—M. J. Andrew, V. C. Chambers, E. A. Coleman, E. K. Conner, R. E. Decosterd, F. E. Eager, E. Elsley, C. Hill, J. E. James, J. Notman, A. Pearce, B. M. I. Poole, R. Preston, C. M. Prothero, G. Roberts, F. J. Starr.

*East End Mothers' Home.*—R. A. Butler, J. M. L. Edwards, L. G. Hughes, C. McKenna, F. R. Morgan, A. M. Murray, M. W. Parker, J. Scarborough, C. A. Stanier, M. F. Thomson, F. Ward, M. A. Ward, M. W. Wilkinson, H. Wood, E. Young.

*Edmonton Union Infirmary.*—A. Blakesley, E. J. Huggard, M. N. Smith.

*Elizabeth Garrett Anderson Hospital.*—P. L. A. Comyn, K. Field, A. E. Powers.

*Fulham Midwifery School.*—A. Cadogan, K. E. Gloyne, G. V. Porter, B. A. Squier, M. J. Tyson, R. B. Worsfold.

*General Lying-in Hospital.*—M. Bargate, E. Baxter, A. E. Burley, M. Byrne, M. B. Christie, M. A. Cornes, E. E. de Gronchy, D. K. Ducker, M. F. Eason, M. E. Francis, D. Gale, M. Garron, C. P. Hobson, L. Hughes, C. M. Mackinley, E. M. Montgomery, J. E. Morgan, C. G. G. Palmer, E. Pike, P. I. Pisani, F. M. Riley, C. R. Seth-Smith, M. M. M. Smith, P. E. Stubbs, M. E. Tribick, D. L. Webb.

*Greenwich Union Infirmary.*—D. E. E. Hall, E. McCarthy, C. M. Nation.

*Guy's Institution.*—M. Bentham, D. W. Gower, D. F. Hopson, J. L. Milne, D. R. Palmer, D. M. Pawson, E. M. Pickard, E. B. Strain, F. Taylor, A. Verinder, D. W. Woods.

*Hackney Union Infirmary.*—A. M. Bennett, M. E. Capon, M. McKenzie, M. T. Morrison, L. E. Rickles.

*Hammersmith: Parkside Maternity Hospital.*—L. C. Davison, N. O. Henderson, F. W. Jones, L. E. Redknap.

*Jewish Maternity District Nursing Society.*—V. Barugh, E. Patchell, A. Waterman.

*Kensington Union Infirmary.*—L. Cooper, B. M. le Fevre.

*Lady Holland Maternity Home.*—A. R. E. Ford, V. L. Gee.

*Lambeth Union Infirmary.*—M. Forde, E. G. Wilson.

*Lock Hospital.*—D. M. Lewin.

*London Hospital.*—F. G. Bloomer, J. M. Clancy, D. M. Clark, E. J. Clark, E. Goodenough, M. L. Mitchell, E. Philpot, O. M. Russell, B. M. Smith, P. M. Willis.

*Maternity Nursing Association.*—I. M. Akerman, A. L. Brown, F. M. V. B. Brown, R. Buckland, H. Collins, A. Deasy, C. D. M. Hunt, A. A. Jacklin, L. E. Jones, M. A. Moggie, M. Parry, L. A. Peacock, A. M. Stace, D. M. Upjohn.

*Middlesex Hospital.*—M. V. Boddy, H. P. Buncombe, R. G. Burnett, L. A. Clement, E. Douglas, D. M. Hartley, C. C. V. Matthews, R. W. Maxwell, H. M. Row.

*Ormond Home for Nurses.*—E. Grummitt, H. M. R. Phillips.

*Plaistow Maternity Charity.*—M. G. Battle, E. Bebb, M. Cawley, A. B. Church, M. A. B. Corrie, R. E. Downing, K. A. Fogden, E. M. Fraser, L. M. Furney, A. S. Green, M. J. Green, F. A. Gidley, L. G. M. Griffin, E. Griffiths, M. C. Groves, A. Hardy, M. Heath, M. Hill, E. Hodgson, A. Hughes, E. K. Jackson, J. Jones, L. M. Jones, A. C. Joyce, R. E. Kemp, M. E. Kenny, H. J. G. Kirby, N. Mace, H. J. Magee, E. A. Marcroft, M. E. Owens, C. M. Phillips, W. M. Poole, A. Preece, M. Roberts, M. A. Ruddle, A. D. Short, F. Stevens, F. E. Wade, E. E. Wainwright, A. G. Watson, S. Wilding, H. J. Williams, P. A. Williams, M. Witney.

*Pemberton Nursing Institute.*—A. M. Scott, A. Vaughan.

*Queen Charlotte's Hospital.*—D. F. A. Blizzard, A. Boyton, N. L. Bradley, M. M. Brash, D. E. Cook, A. S. Cowell, C. E. Cunningham, A. W. Deane, M. A. V. M. de Gruchy, K. E. H. Duff, E. Duffy, A. A. Easton, A. G. Ewins, M. Fane, L. B. Flemons, B. M. Flood, V. B. Freeston, B. E. Fynn, D. E. Grantham, G. Harrison, M. Houghton, E. T. Hill, M. A. Hunting, K. A. Marsh, E. M. Maxwell, A. M. Moseley, J. E. Musto, J. Norris, E. F. Perry, R. M. Renwick, C. M. Roberts, E. Shallcroft, A. Sirakian, L. M. Smith, C. M. Snow, C. Thewlis, I. I. Wallace, R. Walther, F. E. Westoby, D. J. Williams, E. S. Wright.

*Salvation Army Mothers' Hospital.*—L. Atkinson, I. Cook, L. Hambridge, C. E. Hamilton, A. Meester, E. M. J. Reading, A. A. Ritchie, W. M. Tope, F. Turner, M. Tyson.

*Shoreditch Union Infirmary.*—H. Evans, A. E. Leaton, K. E. Thomas.

*St. Bartholomew's Hospital.*—E. Spackman.

*St. Marylebone Workhouse Infirmary.*—K. Kendrick, L. A. Rowson, J. L. Wray.

*St. Pancras Workhouse.*—A. F. Chismon, V. E. Milson.

*St. Thomas' Hospital.*—H. Higgins, I. R. C. Ward.

*University College Hospital.*—A. Elliott, L. B. Greig, V. M. J. Pardoe.

*Wandsworth Union Workhouse.*—D. E. M. Mollett, M. E. Robson.

*Whitechapel Union Infirmary.*—L. Cusden.

*Woolwich Military Families' Hospital.*—H. J. Davies.

#### PROVINCIAL.

*Aldershot Louise Margaret Hospital.*—E. E. Mead.

*Aston Union Workhouse.*—E. R. Bennett, M. J. T. Hoare, A. B. Johns, J. I. Merrett.

*Bath Maternity Hospital.*—H. Brooks, A. M. M. King.

*Birkenhead Maternity Hospital.*—A. Dredge, L. Eaton, E. M. Ingram, E. Murphy, C. E. Pemberton, J. McR. White.

*Birmingham Maternity Hospital.*—J. Bates, L. A. Chambers, G. Clarke, B. Connelly, M. Davies, S. Dixon, P. Ford, L. J. Gorick, G. E. Martin, A. E. Packer, M. M. Paris, M. Pitt, M. E. Price, F. A. Smith, S. Smyth, A. Taylor, S. E. Whalley, F. R. Wilcox.

*Bradford Union Hospital.*—A. M. Ellis, E. A. Simonett.

*Brentford Union Infirmary.*—M. V. E. Davey, A. Lowe.

*Brighton Hospital for Women.*—S. E. Aldous, K. Baker, D. Beard, E. H. Booth, F. Buffard, H. G. Douglas, E. Fish, D. France, D. J. Goddard, T. M. Harmon, W. Henderson, M. D. McLeod, E. V. Rankine, A. E. Russell, S. I. Stevens.

*Bristol: Eastville Workhouse Infirmary.*—W. A. Charloe.

*Bristol General Hospital.*—R. Attal, D. V. Bennett, H. M. Chard, A. Clague, D. M. Dence, M. May, M. E. Parker.

*Bristol Royal Infirmary.*—C. E. Bennett, G. Bliss, D. H. S. T. Evans, D. M. Slade, E. S. Toop.

*Carlisle District Nursing Association.*—F. R. Bach.

*Cheltenham District Nursing Association.*—M. F. Beardshaw, A. E. Bussby, M. E. Holman, A. Mindham, V. A. Walker, I. F. L. Weir.

*Chester Benevolent Institution.*—D. Rowan.

*Coventry Union Infirmary.*—L. King.

*Croydon: St. Mary's Maternity Hostel.*—F. H. Airey.

*Darwen District Nursing Association.*—C. Sprintall.

*Derby: Royal Derbyshire Nursing Association.*—E. G. Adams, E. Baum, M. E. Bishop, D. M. Dalrymple, M. E. Dunsford, A. Fitton, C. Hickey, E. A. Jarvis, M. Kelly, M. H. Kidd, A. Sloan, H. A. Smith, A. Walker, M. Watkins, F. M. Williams.

*Devonbury Union Infirmary.*—M. I. Bellerby, E. Bray, J. Cleasby, C. Dransfield, J. Hardy, D. Hough, S. Mortimer, E. Preston, A. Roberts, E. Roberts, N. Robinson.

*Devon and Cornwall Training School.*—M. Bayliss, L. Dennis, L. Dunstan, S. Jenkins, L. Jones, M. E. Medway, E. M. Morgan, I. St. J. O'Neill.

*Devonport: Alexandra Nursing Association.*—M. G. Flexman, N. C. Gibbins, M. M. Hall, M.

Harry, D. L. Hotchings, G. E. Lewis, F. Parnell, M. M. J. Stone, I. M. Westbrook.

*Devonport Military Families' Hospital.*—E. C. Steward.

*Ecclesall Bierlow Union Infirmary.*—H. M. Drabble, P. W. Holmes, M. E. Kirk.

*Essex County Nursing Association.*—M. Bray, L. E. Floyd, F. E. Hicks, A. L. Kenney, E. A. Robinson.

*Epsom Union Infirmary.*—M. Clayton, H. E. Woods.

*Exeter District Nursing Association.*—F. E. Davis, L. M. Hamlyn, F. A. Harland.

*Gloucester District Nursing Society.*—A. M. Bevan, F. J. I. Knight, E. S. Rea, S. E. Roberts, A. R. Shoemsmith.

*Halifax District Nursing Association.*—E. Bennett, M. Gibbon, M. E. Rieley.

*Hastings District Nursing Association.*—C. H. Chaplin, D. M. Evans, E. I. Killick.

*Herts. County Nursing Association.*—A. M. Day, R. M. Jones, A. M. Shelton.

*Hull Lying-in Charity.*—C. D. Hirst, L. Mitchell, A. Roberts.

*Ipswich Nurses' Home.*—N. Bullard, M. G. M. S. Etchel, E. E. Hearn, E. Rowe, P. Styles, E. J. Vaughan-Owen, E. Ward.

*Kingston-on-Thames Union Infirmary.*—M. S. D. Brown, A. J. Hammel.

*Kingswood District Nursing Association.*—F. Lane, B. Roberts.

*Leeds Maternity Hospital.*—B. Ashford, A. Bingham, M. Bott, N. M. Claye, S. Coltman, G. M. P. Cooper, L. M. Davis, E. Dyson, C. E. Eason, J. Emmett, E. Ferguson, H. Gibbs, J. Hepplestone, G. E. Holmes, E. C. M. Huffan, B. M. Hutton, E. Lister, E. G. Littlewood, M. Longbottom, K. M. McDermid, J. McNish, C. L. Perkins, M. Pickard, S. Pinkney, M. H. Read, F. Reeves, E. Robertson, I. F. Robson, I. Robson, J. Rutter, B. W. Scarr, F. Tate, W. P. Tibbles, L. J. Walker, E. M. Watkins, M. Watson, M. A. Whitehead, E. Wolfenden.

(To be concluded.)

## MOTHERS AND CHILDREN, HOMES AND HOSPITALS.

In view of enquiries from local authorities and others, the Ministry of Health has compiled a list of Residential Institutions in England and Wales in connection with Maternity and Child Welfare. The list which will shortly be published by the Stationery Office contains the names and addresses of 318 Institutions (with 4599 beds) dealing only with cases of mothers and children. These Institutions are divided into five classes, namely (1) Homes for Mothers and Babies; (2) Homes for Children under 5; (3) Maternity Homes and Hospitals; (4) Hospitals for children under 5; and (5) Convalescent Homes. All Institutions of the kind known to the Ministry are included in the list, with the exception of some which have been inspected and found unsatisfactory.



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## EDITORIAL.

### PUBLIC HEALTH NURSING.

Nurses will doubtless have read with interest the first public report of the deliberations of the General Nursing Council, which we published in a recent issue. It cannot be too frequently emphasised, that the new Registration Acts imply higher educational standards. To those nurses wholly lacking in lawful ambition (if there are any!) this may be a sinister portent! but to those imbued with the spirit of nursing *progress*, it will bring hope and aspiration. Public Health Nursing is likely to become wholly the province of the Ministry of Health, which already contributes a grant towards the salaries of Health Visitors, &c. We hear nurses complain sometimes that the salaries they receive as Health Visitors are insufficient, while the salaries paid to Health Visitors who are without hospital training are considerably higher. The complaint seems justifiable at first sight, and we are in sympathy with them; but there is another side to the question which they appear to overlook.

In the first place, nurses must remember, that trained nursing before December, 1919, has had no status; the memorable statement of Mr. Lloyd George, that there was no such thing *in law* as a trained nurse, was correct. There was no standard, no guarantee of fitness to fill a well-paid post under a Public Body. We have lately made enquiries concerning the qualifications and salaries of Health Visitors and Sanitary Inspectors appointed and paid (in part) by a certain Metropolitan Borough Council, and the information gained is very enlightening. We give below three examples of the qualifications possessed by ladies engaged in Public Health work:

- (a) Miss B., Sanitary Inspector; B.A. (London); Sanitary Inspectors' Examination Board; Training Course for Sanitary Inspector; National Health Society's Diploma; South Kensington Certificate of Hygiene.
- (b) Miss S., Sanitary Inspector and Health Visitor; Certificate of Sanitary Inspectors' Examination Board; National Health Society's Diploma in Hygiene and Physiology, Nursing and First Aid.
- (c) Miss A., Health Visitor; Certificate of Royal Sanitary Institute (for Health Visitors and School Nurses); Sanitary Inspectors' Examination Board; Royal Sanitary Institute for Inspection of Nuisances; practical experience in nursing; First Aid and Home Nursing.

It will be seen that a little amateur nursing does not come amiss! The salaries of these ladies are: (a) and (b), £383 14s.; (c), £319 14s. The reason for this discrepancy is not apparent. The scale includes bonuses. Now, we have in our list two trained nurses as Health Visitors, employed as Infant Welfare workers, who receive only £170 including bonus. Another, with a two-years certificate of the Evelina Hospital for Children, one year's training at the Battersea Polytechnic, and ten years' experience in Infant Welfare work, receives the same.

The moral is obvious; namely, the highest qualifications are essential in order to fill the best-paid posts. This is a healthy and encouraging sign. The Public and Public Bodies do not yet realise that the Nursing profession has been raised to legal status, and trained nursing does not at present command the attention and respect that it merits. But

this will not last. In the meantime, however, nurses who want to take up any branch of Public Health Nursing must not rely solely upon their hospital certificate; they must qualify for one or more of the certificates granted by the Royal Sanitary Institute. By doing so, they would find favour in the eyes of the Minister of Health, who, having piloted our Registration Act through Parliament, would probably give preferential treatment to "registered nurses," plus other qualifications.

In our opinion, when Nursing education been defined, a State examination passed, and the Certificate registered by the General Nursing Council, it is not improbable that hygiene, sanitation and midwifery will be included in the curriculum and "Registered Nurse" come to be recognised as an all-round trained and efficient practitioner—with a knowledge of preventive, as well as curative, nursing.

## OUR PRIZE COMPETITION.

**WHAT ARE THE PRINCIPAL DRUGS TAKEN BY DRUG ADDICTS? WHAT PRECAUTIONS WOULD YOU TAKE IN REGARD TO SUCH PATIENTS, AND WHAT ARE THE NURSING POINTS IN CARING FOR THEM?**

We have pleasure in awarding the prize this week to Miss M. A. Jacob Hood, Barden House, Tunbridge Wells.

### PRIZE PAPER.

The principal drugs taken by those with the "drug habit" are morphia, bromides, laudanum, opium, chloral, cocaine, æther, sulphonal, veronal, trional; and aspirin may be included, as it is taken so extensively as to be mentioned as a drug to be avoided. In the treatment of these cases, the first point to be considered is the removal, if possible, of the cause for which the drug was first prescribed, and a complete change of air and surroundings arranged, if possible. It is an essential point that the nurse in charge of the case should be one with whom the patient has interests in common; and one who has a strong and attractive personality is more likely to be able to help the patient to obtain the desired control over his craving. She must ascertain how the drug is procured, and find out if the patient has a stock in his possession, secreted in the house or about his person. If the drug has been ordered for insomnia, find out in what air the patient has had the most refreshing sleep—in bracing or relaxing air, in country or town, inland or by the sea. If insomnia persists, the medical man may order paraldehyde. Massage is helpful to almost any drug maniac, and restores tone to the system. The morning

treatment may include resistive movements as soon as the masseuse has control over her patient; if given at night, the massage must be soothing, to induce sleep. Plenty of fresh air is desirable, and the patient interested in some outdoor occupation, such as gardening, botany, sketching, photography, care being taken that the patient does not get overtired or bored. The same applies to indoor occupation for both sexes. These cases rarely amuse themselves with reading, but if they can be induced to occupy themselves with needlework, knitting, netting, cutting out or making up, jig-saws, rug-making, &c., they often appreciate being read aloud to for hours at a time. Sometimes they can be persuaded to take up music in some form, probably studied in school days. Plenty of good and varied food, digestible and served in an appetizing manner, is most essential. If morphia or bromides have been taken, there is often a craving also for stimulants, in which case good coffee may be given for breakfast and after lunch, but avoided later in the day, when plenty of milk, lemonade, barley water, soda water, &c., should be taken. The bowels must be kept well open, and plenty of raw and cooked fruit given in preference to any aperient, when once a daily action has been established. The patient should have a hot blanket bath daily until he is well enough to take a bath. When the drug habit has been indulged in largely, the patient usually becomes indifferent to his personal appearance, and takes no pride in wearing suitable, or even clean, garments. The nurse must endeavour to stimulate the patient to take interest in his or her clothes, and if well enough, must persuade them to meet their friends and as soon as possible lead a normal life, giving up all drugs and any invalid habits. Care must be taken to give no drugs whatever, unless ordered by a medical man, and the patient should never see the prescriptions. The greatest watchfulness must be exercised with all drug cases, but as unobtrusively as possible, as they should never get the impression, whether rightly or wrongly, that they are not trusted.

### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Mary Green, Miss Jane Watson, and Miss Susan Lambert.

### QUESTION FOR NEXT WEEK.

Mention any two surgical conditions which may follow infectious diseases. Describe fully one of them. If an operation should be necessary, describe in detail how you would prepare the patient.

## THE TYPHUS MENACE.

Mr. Balfour, in the name of the Council of the League of Nations, has issued an appeal to the various Governments for the immediate provision of £250,000 of the £10,000,000 needed to enable the League to deal with the growing menace of typhus in Poland and Eastern Europe. As yet says Mr. Balfour, the appeal has met with but scant success.

In addition to the claim of humanity the letter states "if the plague be allowed to spread unchecked from Russia into Poland, it will assuredly spread from Poland to her western and southern neighbours. In Central Europe every circumstance—moral and material—favours the disease. A population weakened by war and famine is living in conditions which, even were it vigorous and well fed, would make resistance to infection difficult or impossible. As infection spreads it becomes harder to deal with, and no European country, not perhaps even an island like Great Britain, can count itself wholly safe if Poland be allowed to succumb."

In this connection the *Times* reminds us of the danger of lice.

The menace of typhus is great or small in any community according as the louse population of that community is great or small. Happily, the Medical Officer of Health for London has laboured indefatigably to reduce the pest. Last year 2,031,735 children were examined. Of these, 459,396, or nearly half-a-million (that is nearly 25 per cent.), were found to be verminous. The growth of the danger during the war is seen from the numbers of children brought to the cleansing stations. The following table is important:—

NUMBER OF CHILDREN BROUGHT TO CLEANSING STATIONS.

Years.	Children.
1913-1916 .. ..	45,711 (Average.)
1917 .. ..	80,755
1918 .. ..	95,033
1919 .. ..	105,639

There are now 25 cleansing stations in London. Last year nurses examined 566,178 children, and 33,222 of these were verminous. In another examination, made last Christmas, when every child attending school was examined by the nurse, 110,787 were found to be unclean. The efforts being made are coping with the problem, but Dr. Hamer is of opinion that "the recovery from the set-back due to the war is not yet complete." Thanks to the use of a special shampoo and comb, the hair can now be cleansed without cutting it.

Happily, there is no typhus fever in London at present. But with so much to be done in the direction of cleansing we cannot regard ourselves as safe. If infection were to come the parasites are ready to spread it.

## NURSING ECHOES.

Until the end of the year THE BRITISH JOURNAL OF NURSING will be supplied on preferential terms to members of self-governing nursing organisations, resident in the United Kingdom, if 8s. 8d. is sent for an annual subscription to the Manager, BRITISH JOURNAL OF NURSING office, 431, Oxford Street, London, W.1. This privilege cannot be guaranteed beyond that date, owing to increased postage and further increase in the cost of printing, paper and production. Every nurse, therefore, who values a professional organ in the press should become a subscriber, and persuade at least one colleague to do likewise, so that an ever wider circle of trained nurses may interest themselves in the work of the General Nursing Council, their governing body, and in the uplifting of the nursing profession. The Council meetings (soon to be resumed) are reported in this Journal by a highly qualified professional woman, and the more sympathetic interest nurses take in its work, the greater the encouragement will be for the Council to effect the beneficial reforms anticipated by Parliament.

Moral: Read the *B.J.N.* and keep up-to-date with professional affairs.

We note that County Nursing Associations and their officials are very busy pressing young women to undergo the short nursing training they have set up for village nurses, and that glowing reports of such work is alluded to as an "excellent career in the nursing profession." Now, these nurse-midwives with their few months' training, are not qualifying for the "nursing profession"—as in the near future it will be the duty of the General Nursing Council to reconsider the organisation of curricula which will qualify well-educated girls for passing a State examination, and to guarantee them as thoroughly trained and efficient registered nurses. This cannot be accomplished in a few months. As far as we know the County Nursing Committees are composed almost entirely of titled and socially prominent women, who have no knowledge whatever of nursing education, but who have assumed the responsibility of defining it—so far as their poorer neighbours are concerned—and who are, we regret to say, convinced that they are much more capable of exercising this authority than any trained nurse can be. We fear many young women are being misled. It may become necessary at no distant date for the Ministry of Health to issue a plain state-

ment in this connection. What is required is a highly efficient State Service of Communal Nursing, entirely free from social patronage and charity, for which all classes could insure.

The Sale and Fête arranged by the Sisters' Hospital Aid Association, at the Prince of Wales's General Hospital, Tottenham, on Thursday, September 2nd, was very successful, despite the weather, which endeavoured to hamper the proceedings.

The splendid band of the N Division of Police, twenty-eight strong, played on the balcony of Alexandra Ward, in which the Sale was held. A family of five black and white kittens was among the goods offered for sale. The company was not so large as it might have been had the sun shone more brightly, but those present bought well, and the eleven stalls were almost cleared of their goods. Refreshments were served in Nurses' dining and sitting rooms. There was a rifle range in the grounds, and the Nurses handled their rifles quite expertly, and made fine scores. A tug-of-war was pulled on damp and slippery ground by Tottenham *v.* Edmonton Police. The weather improved by 5.30, when the children, being eager to carry out their sports programme, it was gone through as quickly as possible. There were flat races, high jumps, long jumps, relay races and tugs-of-war for boys and for girls. A conjuring entertainment and concerts were held in the Out-Patient Waiting Hall in the evening.

An appeal is being made for donations and subscriptions for Queen Mary's Hostel for Nurses at 194, Queen's Gate, S.W. It is the last of the fine war hostels bearing the Queen's name, which proved of such remarkable service to military nurses passing through London during the war. At present, in addition to

members of Queen Alexandra's Imperial Nursing Services, nurses belonging to the Queen Victoria Jubilee Institute, Colonial Nurses and those working for the Ministry of Pensions are admitted, and as the hospitality offered is absolutely free, even including laundry, it is estimated that £5,000 a year is required if this temporary home is to continue without payment.

The Committee of the Edith Cavell Homes of Rest are anxious to raise £20,000 to £30,000, so that the three freehold homes which have been given to the Fund may be endowed. For this purpose, Edith Cavell



AN EASY WINNER IN THE NURSES' SHOOTING COMPETITION.

Memorial Day is to be held on October 12th, and nurses in uniform are invited to sell violets in the streets in support of the charity. Offers of assistance should be addressed to Mrs. Adair, Edith Cavell Homes for Nurses, 25, Victoria Street, London, S.W. We are informed that there is great need of these Homes, presumably due to the overwork and ill pay of nurses in the past—but there is no doubt that public begging by nurses in uniform in the streets depreciates the status of the whole profession, and inspires young women about to enter upon a career with lack of confidence in the economic stability of

nursing, and is one of the most potent factors resulting in the shortage of probationers. These Homes we know to be well managed, although a certain number of women are admitted who should not accept public charity.

The reunion of the past and present nurses of the Firvale Hospital, Sheffield, took place recently, when they were entertained by the matron, Mrs. A. C. Lawson, R.R.C., in the nurses' home. The entertainment took the form of a garden party, supplemented by music, games and dancing. Many of the guests were the first probationers of the matron, who has held that office for 26 years, and whose term of office has been of the utmost value to the hospital—and the nursing school.

The late Mr. William H. Anderson, of Hanover Terrace, London, left £200 to Nurse Madeline Anne Brown, of Newry, Ireland, and £100 to Sister Mary Pulham, of the Nurses' Co-operation, 22, Langham Street, W.

The Liverpool Queen Victoria District Nursing Association gets a legacy of £500 under the will of the late Mr. Ralph Langton Neilson.

A conference of trained nurses of the northern countries was held at Stockholm from September 6th to 10th, in order to discuss the questions of an eight-hour day, co-operation between the northern countries, and nurses' salaries. It is now eight years since trained nurses held an International Conference in Cologne in 1912. Then delegates from Norway, Sweden, Denmark and Finland foregathered—with the representatives of twenty other countries—a meeting which, it is to be feared, will not be equalled in sisterly spirit for many years to come.

### INTERNATIONAL NEWS.

Miss Dock, Hon. Secretary of the International Council of Nurses, reports that applications for affiliation have been received from National Associations of Trained Nurses from Norway, Belgium, Italy and China. This is most hopeful, as evidence of the renaissance of international sympathy in the Nursing World, and of the determination of trained nurses to govern their own international relations—a wise decision.

The enlargement of the mind, and the expansion of the outlook, which comes from international association is limitless.

## HONOURS FOR MEMBERS OF THE FRENCH FLAG NURSING CORPS.

### MÉDAILLE DE LA RECONNAISSANCE FRANÇAISE.

By decrees of the President of the French Republic, dated April 1st and 30th, and May 1st and 5th, 1920, issued on the recommendation of the Prime Minister, Minister of Foreign Affairs, and on the advice, in conformity with this, of the Committee dealing with the Médaille de la Reconnaissance Française (Medal of the Gratitude of the French) dated March 6th, 12th, 19th, and 24th, and April 14th, 21st, and 23rd, 1920, the Medal has been conferred on the following members of the French Flag Nursing Corps:—

### CITATIONS.

#### SILVER-GILT.

**Addison, Miss Clementine**, of British nationality, certificated nurse; served from April, 1915, to April 1916. Contracted blood-poisoning during her service and died two months after. Was highly appreciated and is deeply regretted.

**Lind, Miss Lily**, of British nationality, certificated nurse; served from October, 1914, to October, 1916; a devoted, zealous and most capable nurse. Went through the artillery bombardments at Bergues in 1915. While engaged in nursing infectious cases contracted pulmonary tuberculosis; returning to her country (New Zealand), died on the way.

**Nairne, Miss Margaret Stuart**, of British nationality, certificated nurse; served from December, 1914; gave proof of great self-denial and courage in the various sections to which she was attached. Head nurse at the Hospital of Talence; helped with the surgical service. She suffered aerial bombardments with calmness. When engaged in nursing the gassed, she contracted pulmonary tuberculosis.

#### SILVER.

**Bennett, Miss Ellen**, of British nationality, certificated nurse; served from November, 1914, to the end of hostilities. Very devoted and very courageous, bore with *sang-froid* the violent bombardment of Fismes and at the retreat of Jouaignes, was an example of self-sacrifice. Attracted the sympathy of all around her.

**Burn, Miss Florence**, of British nationality, certificated nurse; served from November, 1914, to the end of hostilities. In this long period of service, proved herself very devoted, very kind and generous. Suffered several bombardments in the region of Dunkirk. Gained by her praiseworthy conduct the gratitude of her superiors.

**Campbell, Miss Jean McGibbon**, of British nationality, certificated nurse; served from July, 1915, to the end of hostilities. Carried out with courage and devotion the various tasks with which she was entrusted. Acquired a great influence over the wounded and lavished upon them great moral support. Preserved an invariable *sang-froid* in the midst of the bombardments of Compiègne, Royallieu and Rezon-sur-Matz.

**Hallam, Mrs. Sarah**, of British nationality, certificated nurse; served from November, 1914, to the end of hostilities. In this long period of service, was very devoted, very kind and generous. Suffered several bombardments in the district of Dunkirk.

Won by her praise-worthy conduct the gratitude of her superiors.

**Haswell, Miss Emily Jane**, of British nationality, certificated nurse; served from 1914; never ceased to show the greatest devotion and the greatest power of organisation in her position as matron.

**Jamard, Mrs. Rosemond Christine** (*née* Hendrie), of British nationality, certificated nurse; served from November, 1914, to December, 1917, gave proof of devotion to her task; very kind and very persevering; was esteemed by all; gave effective and very capable assistance to her ambulance; bore courageously the bombardment of Fismes.

**Macaulay, Miss Jane**, of British nationality, certificated nurse; a model of devotion and self-sacrifice, attached to the ambulance of Vauxboin, took part in the French retreat, fulfilled with zeal the work she had undertaken in infectious cases; served from November, 1914, to the end of hostilities.

**Mitchell, Miss Christina Tait**, of British nationality, certificated nurse; served from November, 1914, to the end of the war; always showed unlimited devotion; took part in the retreat of Château-Thierry; attached to the neurological service; showed herself kind and generous.

**O'Leary, Miss Catherine**, of British nationality, certificated nurse, served from April, 1915, to the end of hostilities; of a remarkable devotion and zeal; acquitted herself of her mission in a perfect manner. Suffered several bombardments; her courage and her self-sacrifice procured for her the praise of her superiors; her conduct was most meritorious.

**Park, Miss Agnes Mary**, of British nationality, certificated nurse; served from December, 1914, to the end of hostilities; very hard-working and very devoted, performed the services entrusted to her with perfect zeal; bore with calmness the bombardment of Fismes; conduct worthy of all praise.

**Perkins, Miss Celia**, of British nationality, certificated nurse; served from February, 1915, to the end of hostilities. Attached to the Surgical Services, gave proof of courage in various bombardments; was with the ambulance of Verneuil at the time of the French retreat in April, 1918, voluntarily endured an arduous life in an ambulance in the devastated regions.

**Pope, Miss Daisy E.**, of British nationality, certificated nurse; served from May, 1915, to the end of hostilities, attached to the surgical service; gave proof of courage in various bombardments; was with the ambulance of Verneuil at the time of the French retreat in April, 1918; voluntarily endured an arduous life in an ambulance in the devastated regions.

**Richard, Miss Mary Catherine**, of British nationality, certificated nurse; served during four years, from November, 1914, in an ambulance at the front; went through the retreat of Jouaignes, where she showed remarkable initiative, fulfilling her task with unflinching disinterestedness.

**Sainsbury, Miss Dorothy**, of British nationality, certificated nurse; served from April, 1915, up to the present time; kind and hard-working, fulfilled her mission with ardour; suffered the bombardments of Bergues and Fismes; gave proof of great initiative at the time of the evacuation of her ambulance in May, 1918.

**Simpson, Miss Dora Tait**, of British nationality, certificated nurse; served from November, 1914, to the end of hostilities. Very devoted, very courageous, bore with *sang-froid* the violent bombardment of Fismes at the time of the retreat of Jouaignes.

**Turnell, Miss Eleanor**, of British nationality, certificated nurse; served from March, 1915, to the end

of hostilities; gave proof of indomitable courage during the bombardments of Bergues and of Fismes; very devoted, very zealous, was esteemed by everyone.

**Willets, Miss Annie**, of British nationality, certificated nurse; serving from November, 1914; a model of devotion and self-sacrifice, attached to the ambulance of Vauxboin, took part in the French retreat; fulfilled with zeal her voluntary work of nursing infectious cases.

### BRONZE.

**Carmichael, Miss Isabel**, of British nationality, certificated nurse; served from October, 1914, to December, 1916; made herself appreciated by the devotion and zeal which she showed in consecrating herself to the service of typhoid patients; bore with *sang-froid* the bombardment of Fismes (Bergues).

**Conway-Gordon, Miss Margaret**, of British nationality, certificated nurse; served from November, 1914, to the end of hostilities with zeal and devotion. Her courage during the retreat of Coinzy gained for her the congratulations of her superiors.

**Hawthorne, Miss Gladys Mary**, of British nationality, certificated nurse; served from May, 1915, to September, 1918. During her work in nursing infectious cases, her disinterestedness and perseverance were noticed by all; bore the evacuation of the ambulance of Jouaignes; rendered services which were highly appreciated.

**Hitchcock, Miss Margaret**, of British nationality, certificated nurse; served from October, 1914, to October, 1916. During this period rendered very much appreciated services. Was distinguished by her energy and *sang froid* during the artillery bombardment of Bergues.

**Jeffery, Miss Mabel E.**, of British nationality, certificated nurse; served from April, 1916, to the end of the war; while engaged in nursing infectious cases, she was distinguished by her devotion and disinterestedness; evacuated from Vauxboin with her ambulance, she lavished encouragement on the patients confided to her care.

**MacIntyre, Miss Margaret**, of British nationality, certificated nurse; served from January, 1916, to March, 1918; bore with calmness and fortitude numerous aerial bombardments.

**MacLaughlin, Miss Florence Mary**, of British nationality, certificated nurse; serving from March, 1916, to the end of the war, rendered greatly appreciated services; attached to the ambulance of Epernay, nursed infectious cases.

**Mann, Miss Louise**, of British nationality, certificated nurse; served from November, 1914, to the end of the war. During four years rendered devoted services at the hospital of Caen; very gentle and untiring, she won the admiration of the wounded whom she nursed.

**Mooney, Miss Louise**, of British nationality, certificated nurse; served from November, 1914, to the end of the war. During more than four years, rendered greatly appreciated services at the mixed hospital of Caen; very gentle and untiring, won the admiration of the wounded whom she nursed; her great aptitude gained for her well merited praise from her superiors.

**Morris, Miss Florence**, of British nationality, certificated nurse; served from January, 1916, to March, 1918; bore with *sang-froid* numerous aerial bombardments; kind and untiring, she made herself highly appreciated by her zeal and her devotion.

**Roberts, Miss Annie**, of British nationality, certificated nurse; served from May, 1915, to April, 1918—a period of three years—with zeal and



devotion. Her extreme kindness gained for her the esteem of everyone.

Wood, Miss Adine Frances Harvey, of British nationality, certificated nurse; served from June, 1916, to the end of the war in an ambulance at the front; distinguished herself by giving her assistance in nursing infectious cases, and took part in the retreat of Vauxboin; also rendered greatly appreciated services at Pontoise, in a surgical service.

It will, we feel sure, be a great consolation to the parents of the late Sister Addison and Sister Lind (Registered Nurses' Society), to receive the Gold Medal of Gratitude from the French nation, and we congratulate Sister Stuart Nairne on this recognition of her devoted services to France.

Sisters Bennett, Jarmard, Mitchell and Simpson belonged to the Scottish Units, and Sisters O'Leary and Park to the Irish Units.

The following Queen's Nurses well deserved honourable recognition: Sisters Macaulay, Mitchell, Park, Perkins, Turnell and Willetts. Sister Carmichael is a member of the Registered Nurses' Society, and Sister Hitchcock (New Zealand) was also sent to France by that Society. Sister M. MacIntyre was selected by the National Association of Canadian Nurses. There are still many other members of the Corps who have been highly recommended for this honourable decoration and we hope to be able to announce later that their devoted services have received the recognition they so well deserve.

The highly skilled services of the Sisters of the French Flag Nursing Corps made a deep impression on the Service de Santé throughout the war. It was the only Service which maintained the three years' certificated standard of training.

### NURSES' MISSIONARY LEAGUE.

The Nurses' Missionary League has arranged Devotional Meetings to be held on Thursday, September 16th, at St. Michael's Church, Chester Square, S.W. The day will begin with Holy Communion at 8 a.m., and the morning and afternoon meetings will be from 10.30 to 12.30, and from 3 to 4.30. They will be conducted by the Rev. M. H. Richmond, M.A., whose addresses will be on the subjects: "God Creator and Father, Giving to Us Creating Power"; "Jesus Christ, the Explanation of God and of Man"; "Holy Spirit, the Gift of God's Spirit Within." All Nurses are cordially invited to attend.

### THE PROFESSIONAL UNION OF TRAINED NURSES.

The Provisional Committee of the Professional Union of Trained Nurses met for the first time after the summer vacation on Wednesday, September 8th, at 5.30 p.m. There was a very full and important programme of work for the autumn and winter.

The meeting of the Public Health Section is called for Friday, September 10th, at 5.30 p.m., to discuss the salaries of trained nurses in Public Health Work.

## A BURNING QUESTION.

### THE NURSE SHORTAGE.

There is a world shortage of young women willing to train as professional nurses, and the following report submitted by the President of the Canadian Association of Nursing Education, Miss Elizabeth G. Flaws, advocates a publicity crusade.

"The Canadian Association of Nursing Education, which I have the honour to represent, has for its objects the advancement of the educational standards of nursing and the development and maintenance of the highest ideals of the nursing profession.

"The health and welfare of the nation is dependent largely upon the supply of trained and efficient nurses. From authoritative information presented here to-day from all the provinces of the Dominion, it is shown that there is an increasing demand for nurses who are qualified to undertake public health work. Where are these nurses to come from?

"Before the last annual meeting of our association we submitted to the hospitals throughout Canada a questionnaire. From this we found that in every province there was a shortage of both graduates and probationers.

"The chief reasons for the existing shortage are:—

"1. Opportunities in banks and other branches of business which require shorter hours.

"2. Unattractive work as regards hours, length of time in training, and lack of remuneration.

"3. Not large enough percentage of girls taking high school training. Hospitals have grown unproportionately to the supply of suitable candidates.

"4. Unattractive living conditions.

"The very existence of our training schools is being threatened by this shortage of applicants. To remedy this, we must have:

"1. Adequate financial support.

"2. Shorter hours (consequently more students).

"3. Better housing conditions.

"4. The course of training for the students must be reconstructed so as to allow more time in the third year in executive training for administrative duties and for public health work.

"5. The small training schools which have not the facilities for giving this additional training in the third year should be affiliated with the larger schools which have them.

"The assistance which the Red Cross, with its splendid organisation, can render is:

"1. Bringing the profession of nursing before the public and high school pupils, so as to insure a sufficient number of candidates with suitable educational requirements. This must be brought prominently to the attention of such pupils by means of scholarships.

"2. By providing a nurse specially qualified to present the advantages of the nursing profession

to young women through the avenues of the ladies' colleges, Y.W.C.A., young people's societies, business women's clubs, and other women's organisations.

"The general public should know more of the nurses' activities. Every Red Cross member can assist and be a missionary in spreading the gospel of nursing and interesting young women in the work and educating the public up to the need and requirements."

## APPOINTMENTS.

### MATRON.

**Alfreton District Hospital, Derbyshire.**—Miss S. Maullin has been appointed Matron. She was trained at the West Bromwich and District Hospital, and has been night and theatre Sister at the Guest Hospital, Dudley, and Sister at the Royal Naval Hospital, Haslar.

**Bath, Hot Mineral Baths.**—Mrs. L. G. Crawford has been appointed Matron. She was trained at Toronto General Hospital, Canada, and has been Sister-in-Charge at Dr. Howard B. Kelly's Sanatorium, Baltimore, U.S.A., and of the Manor War Hospital, Epsom, Surrey.

**Corporation Maternity Hospital, and Child Welfare Centre, Carlisle.**—Miss F. Drawitt has been appointed Matron. She was trained at the Royal Free Hospital, London, and at the Rotunda Hospital, Dublin, and has been Ward and Theatre Sister at the Royal Free Hospital.

### SISTER-TUTOR.

**Crumpsall Infirmary, Manchester.**—Miss Nora McCheane has been appointed Sister-Tutor. She was trained at the Royal Sussex County Hospital, Brighton, and has since been ward sister at Seaford, at the Dorset County Hospital, and in charge of the X-Ray and electrical department at Addenbrooke's Hospital, Cambridge. Miss McCheane took the course for sister-tutors at King's College for Women. She also holds the certificate of the Incorporated Society of Trained Masseuses.

### SISTER-IN-CHARGE.

**Birmingham, Bromsgrove Open-Air School for Crippled Children.**—Miss Marion Kennedy has been appointed Sister-in-Charge. She was trained at Oldham Royal Infirmary, where she was Sister and Night Sister. She has also held the position of Sister at the Royal Liverpool County Hospital for Children, Cheshire.

### NIGHT SUPERINTENDENT.

**Halifax, St. Luke's Hospital.**—Miss Hope R. Williamott has been appointed Night Superintendent. She was trained at the General Hospital, Bristol. She has been Sister at the South Devon and East Cornwall Hospital, Plymouth, and of the Maternity Ward, St. Luke's Hospital, Halifax. She also gained experience in fever nursing at Great Yarmouth Isolation Hospital. Miss Williamott holds the certificate of the Central Midwives Board.

### THEATRE SISTER.

**Royal Infirmary, Gloucester.**—Miss Lucy Taylor has been appointed Theatre Sister. She was trained at the General Infirmary, Rochdale, and has held the positions of Theatre Sister at Cameron Hospital, West Hartlepool, Stanley Hospital, Liverpool, Welsh Metropolitan War Hospital, Cardiff, and at the Belmont Nursing Home, Leeds.

### SISTER.

**Isolation Hospital, Roman Road, East Ham.**—Miss F. E. Hayes has been appointed Sister. She was trained at the North Staffordshire Infirmary and has been Staff Nurse at the National Hospital, Queen Square, Bloomsbury, Sister at the Cosham Military Hospital and Theatre Sister at the Royal Gwent Hospital, Newport, Monmouthshire. She has also done war nursing at Salonica.

**Montgomery County Infirmary, Newport, Mon.**—Miss Miriam Hicks has been appointed Sister. She was trained at the Dudley Road Infirmary, Birmingham, and has been Sister at a Midwifery Training Home, Brighton, and Sister-in-Charge at the Infirmary, Ludlow. She has also had experience of district and private nursing.

**Sheffield Royal Hospital.**—Miss Gertrude Spencer has been appointed Sister of the X-ray department. She was trained at Brownlow Hill Infirmary, Liverpool, and has been Sister of the X-ray department at the Lincoln County Hospital, the General Hospital, Birmingham, and at the Norfolk and Norwich Hospital.

### HEAD NURSE.

**Axbridge Union Infirmary.**—Miss Maria Lake has been appointed Head Nurse. She was trained at Middlesex Hospital, and at Queen Charlotte's Hospital.

### SCHOOL NURSE AND HEALTH VISITOR.

**Barry Education Committee.**—Miss A. G. Hybart has been appointed School Nurse and Health Visitor. She was trained at King Edward VII's Hospital, Cardiff, and has since been health visitor to the Cardiff County Borough.

### TUBERCULOSIS DISPENSARY NURSE.

**Tuberculosis Dispensary, 18, Ramsden Street, Huddersfield.**—Miss Violet E. Cooper, M.R.B.N.A., has been appointed Tuberculosis Dispensary Nurse. She was trained at the East Suffolk Hospital, Ipswich, and holds the Brompton Hospital post graduate certificate for "Lectures, Hospital and Dispensary Practice." She has also done four-and-a-half years' military service with Queen Alexandra's Imperial Military Nursing Service Reserve, and has had some experience of private nursing. She is a certified midwife.

### RESIGNATION.

#### QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

The *London Gazette* of August 24th contains the following announcement:—

Sister Miss E. A. Rutherford, R.R.C., resigns her appointment (August 23rd).

### PRESENTATION TO MISS ELLEN GAYFORD.

The public testimonial to Miss Ellen Gayford, late Matron of the Teddington Cottage Hospital, resulted in the collection of about £50. This was recently handed to her privately by Mr. Horace Booth, Chairman of the Executive Committee.

In a letter since received by Mr. Booth, Miss Gayford wishes publicly to thank all who subscribed to the fund. She adds: "I shall always remember with gratitude the many expressions and acts of kindness which I have received on leaving the hospital, where I have been for so many years."

Miss Gayford has also received gifts from the medical staff and the committee.

Miss Bewsey, the new Matron, commenced her duties last week.

## OUTSIDE THE GATES.

Mrs. Ogilvie Gordon, D.Sc., Ph.D., F.L.S., J.P., President of the National Council of Women of Great Britain and Ireland, has been appointed the Government representative at the meeting of the International Council of Women in Christiania. Twenty-eight national councils are federated in the International Council, which is meeting for the first time since the war, in the Storting, Christiania, from September 8th to 18th.

On the ground that there was not a quorum present when the amendment was carried, the House of Representatives of Tennessee has expunged from its records the ratification of the amendment to the Constitution granting votes to women. So women will not be entitled to vote in the Presidential election after all. A very unscrupulous job!

We have read with horror and indignation of the ghastly massacre of the Russian Imperial Family at Ekaterinburg, in the series of articles in the *Times*. That they died together was the only merciful aspect of this most barbarous crime. No one in this country will be surprised to learn from the report that "morally, as well as practically, the German hand which had brought the Jew murderers into Russia, controlled and directed the assassins' work. Only when Berlin realised that the Romanovs were irrevocably on the side of the Entente did they release the hands of the murderers."

We learn from G. P. Putnam's Sons, Ltd., that, owing to the phenomenal demand for "The Diary of Opal Whiteley," the first edition is exhausted before publication, and the publishers are rushing through a further large edition.

## NAMES AND ADDRESSES TO NOTE AND REMEMBER.

THE ANGLO-AMERICAN OIL CO., LTD., 36, Queen Anne's Gate, S.W.—The Company are sole distributors for the United Kingdom of "Nujol," the special value of which is that it helps Nature to restore natural bowel action.

## COMING EVENTS.

September 10th.—Professional Union of Trained Nurses: Meeting Public Health Section to discuss the salaries of trained nurses in Public Health Work.

September 11th.—National Union of Trained Nurses: Monthly meeting. London Branch, 46, Marsham Street, S.W.1. 3 p.m.

September 18th.—Matrons' Council of Great Britain and Ireland. Meeting, by invitation, at Queen Mary's Hospital for Children, Carshalton. 3 p.m.

## BOOK OF THE WEEK.

### "BECK OF BECKFORD."

Those of our readers who remember the charm and pathos of "The Story of Mary Dunne" will welcome another book from the pen of the same authoress.

"Beck of Beckford" is a Lancashire tale and relates how Sir John Beck, farmer and baronet, toiled with his hands to retrieve the ruined fortunes of his ancient family and how his grandson, young Roger, who early in the story succeeds to the title, carries on his grandfather's work.

It is a homely scene with which the first chapter opens, for not only does Sir John lead the life of a working farmer, but he and his wife, Lady Beck, speak in the vernacular of their environment.

Referring to the advent of a stranger to the farm:

"A tall old woman confronted him, with a strong face and dark, bright eyes. She wore a print jacket and a white apron over a stuff skirt and her still abundant iron-grey hair was partly covered by an antiquated black lace cap. She had evidently pulled down her sleeves recently, for the cuff of one hung open, and as she spoke she was occupied in buttoning the other, without any appearance of haste or confusion however; indeed, her whole aspect was dignified."

The little lad Roger is depicted as an engaging youngster of six years, finely built and square of shoulder, with fair hair and blue eyes.

He informs the stranger—

"Grandpa's John, my feyther was Rôger, I'm John Roger, but they calls me Roger 'cause the Becks o' Beckford allus take the name in turn. My feyther's dead, so I mun be Roger."

"Dear me, is your father dead?" said Mr. Jeffries, "and your mother too?"

"Ah!" said Roger; "d-e-d."

Sir Roger, the white-bearded ploughman, was dressed like an ordinary working man; his hat was battered and there was earth upon his hands. Nevertheless he was as quiet and dignified in manner as Lady Beck herself.

"There's a visitor in yon, grandpa, an' he's goin' to have dinner wi' us; an' its toad-in-the-hole to-day, an' gran axed him if he minded having it i' the kitchen, an' he said he didn't."

From these extracts it will be seen that the upbringing of the baronet's grandson was at least an unusual one for his walk in life.

The old man and his wife in spite of their homely talk and surrounding were inordinately proud of family and pedigree, but there was a blot on the family escutcheon which was a source of grief to them, and it had caused the name of a certain William Beck to be obliterated from the cherished pedigree.

It was concerning one of the descendants of this outcast member of the family, that the stranger

\*By M. E. FRANCIS. (Allen & Unwin, Ltd.).

had called on Sir John at the commencement of the story.

"This man is of your own flesh and blood, and his intentions to you and yours are of the kindest and most generous order. Finding himself a childless widower he is anxious to devote his immense wealth to the rehabilitation of the family."

He was drawing a card from his pocket when Sir John stopped him with an imperative gesture.

"You shall have your answer now, sir," he said. He spread the Beck pedigree upon the table. What a family it was! The line went right back to the Conquest. "See here," said Sir John, pointing to a certain name low down on the sheet which had been heavily scored across.

"Blotted out!" said Mr. Jeffries.

"Blotted out," repeated Sir John very solemnly as he rolled up the parchment. "That is your answer, sir."

Young Roger grew up with the same inflexible uprightness that had characterised his grandfather. His subsequent education cured him of the Lancashire dialect, but nothing turned him from the love of the farm and of his determination to win his way in that direction.

Fates decreed that he should fall violently in love with the granddaughter of the besmirched Beck, but when he discovered her identity he refused to touch the fortune with which she was endowed. The young American girl, although she was more or less in love with Roger and his "cute" little farm, had no mind for love in a cottage.

Roger consoled himself in due course with pretty Betty who had been his "pal" in their childish days. His stubborn pride would also have refused her fortune, but when their boy was born, he relented.

"Little John Beck shall have his rights," he said.

H. H.

### THE WAYS.

To every man there openeth  
A Way, and Ways, and a Way;  
And the High Soul climbs the High Way  
And the Low Soul gropes the Low,  
And in between, on the misty flats,  
The rest drift to and fro.  
But to every man there openeth  
A High Way and a Low  
And every man decideth  
The way his soul shall go.

JOHN OXENHAM.

In *The King's Highway*.

### A WORD FOR THE WEEK.

"We hear a great deal about the Triple Alliance. The true Triple Alliance is an *entente cordiale* between Brains, Capital, and Labour."

*Sir Kingsley Wood, M.P.*

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### THE NURSING OUTLOOK IN ITALY.

DEAR MADAM,—Anyone who has followed attentively the movement of Nursing Reform in Italy must have felt surprise and even indignation that no allusion was made in an article entitled "The Nursing Outlook in Italy," appearing in the *Nursing Times* of August 14th, to the great work accomplished in this country by the late Princess Doria-Pamphili during the last nine years of her life. It is now about ten years since she began to carry out the scheme she had so much at heart, and established, under Government aegis, a school for the training of nurses at the Policlinico—the great general hospital of Rome. The "Scuola Convitto Regina Elena" under the patronage of the Queen of Italy, has during that time trained some 150 nurses of Italian and other nationalities, on precisely the same lines obtaining in British and American hospitals. In all cases the certificates bestowed upon the successful candidates are signed by the Minister of Health, and are a guarantee of professional proficiency wherever the nurses may choose thereafter to take up hospital work. At least three years' training in a general hospital of not less than 200 beds has always been regarded as the minimum education essential to the equipment of a nurse, and it was to secure this for Italian women that the Scuola Regina Elena was established. The school owes its success not only to the close personal interest of Princess Doria but to the devotion and self-sacrifice of its matron, Miss Dorothy Snell of the A.N.S.R., who left an important post at Aldershot in 1910 to take up this pioneer work abroad. As for the extraordinary statement that the movement towards a properly organised nursing service in Italy was interrupted by the war, it has no verification in fact as anyone who was, like myself, resident in Rome during those sad years can testify. The work of the School continued without any interruption despite innumerable difficulties. Regular probationers, perfectly aware of the value of training and of certificates, went through their two years' course. Numerous assistants were also given a practical insight into hospital work. Nurses already trained at the S.C.R.E. formed a most valuable nucleus of highly-educated professional women capable of imposing their modern knowledge and experience upon any hospital where they might find themselves, to the great benefit of the sick and wounded. With the approbation of the military authorities a hospital of 300 beds was established near the front under the direction of Miss Snell. The activities of the School have by no means diminished, despite the severe blow it



# SURGICAL AND SICK ROOM REQUISITES

**B**OOTS THE CHEMISTS make every provision for the surgical requirements of the medical profession and the general public; and the comprehensive scale upon which appliances are stocked at their branches is a service of real value. At some of their larger branches special surgical departments have been established, at which a feature of great usefulness is the constant attendance of a trained nurse ready to render advice and assistance when needed. All requirements of a special nature which are entrusted to **BOOTS THE CHEMISTS** are carried out with the utmost precision and promptitude.

*Boots*  
Chemists

**555 BRANCHES IN TOWN AND COUNTRY**

BOOTS PURE DRUG COMPANY LIMITED.

received last December by the death of Princess Doria. In justice to her memory I feel it only due to her that some protest should be made at this deliberate ignoring of her great work accomplished for the training of nurses in Italy.

Yours faithfully,

ISABEL C. CLARKE.

Care of Messrs. French, Lemon & Co.,  
Piazza di Spagna, Rome, Italy.

[We learn that great indignation has naturally been aroused by the ignorant article dished up by a representative of the journal referred to, and that the highly trained Italian Sisters at the Scuola Convitto Regina Elena attached to the Policlinico, at Rome, have sent a signed protest to the editor concerning it.

The fine work accomplished in the past ten years by the Scuolo Convitto—under the able superintendence of Miss Dorothy Snell—and fostering care of intelligent Italian women, including the Queen, is known throughout the nursing world.—ED.].

#### BEST WISHES FOR FURTHER SUCCESS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I enclose my subscription to the Journal.

Words cannot express how heartily I congratulate all those who have been instrumental in bringing about Registration in England. What a long fight it has been!

There is much still to be done and there must be no resting on our oars until more is accomplished.

Best wishes for the further success of the cause.

Believe me,

Yours faithfully,

JANE MELITA JONES, R.N.

New Zealand.

#### KERNELS FROM CORRESPONDENCE.

##### TIME TO BEGIN.

*County Hospital Matron*: "When is the crusade suggested in the B.J.N. to arouse the interest of suitable girls in the nursing of the sick to begin? Here in this county things get more and more difficult; we Matrons do not receive applications for training from the right sort, although conditions have greatly improved. Cannot the General Nursing Council send out a flying column to help us? It will be very little use defining an elaborate curriculum of training unless we can get the girls to train."

##### ELIMINATE SNOBBERY.

*Hospital Sister*: "If you ask me the reason of much discontent in the nursing world I should advise eliminating snobbery; the whole hospital world is saturated with it. Clerks, secretaries, teachers and other professional women are free of patronage, why must nursing be controlled by wealthy and titled persons, for ever talking and writing of us as 'poor things.' Eliminate

snobbery, leave us alone to work out our own salvation. But I suppose this cannot be done. Anyway, it is a most evil influence."

#### STATUS OR PROTECTION REQUIRED.

*Organizer*.—"A straw shows which way the wind blows. Nurses may congratulate themselves that at last Government Departments and the public are realising that there is a 'nursing question.' The first result of our Registration Act! Two young Government officials athirst for knowledge have put me through my paces during the past week and taken copious notes. The serious shortage of probationers under present conditions is sounding a note of alarm, both in the Health and Labour Ministries. Let us hope the General Nursing Council will soon begin to make itself felt. Status and protection of standards is imperative."

#### RUBBING UP.

*F. H.*—"Your correspondent, 'An Up-to-date Back Number,' might apply to the City of London Maternity Hospital. I have just spent a fortnight there, which was most instructive and interesting: I paid £2 2s. a week and for my own laundry."

#### NOTICE TO CORRESPONDENTS.

Will correspondents kindly note that each letter now costs 2d.; a stamp for this amount must be enclosed if an answer is required. Also, if articles are submitted for approval a stamped and addressed envelope must be sent. Otherwise, in the event of non-acceptance, the MSS. cannot be returned.

#### NOTICE.

##### PRIVATE NURSING.

Mrs. Bedford Fenwick will see candidates who wish to join the Registered Nurses' Society for private nursing on Saturdays, September 25th and October 8th, at 431, Oxford Street, London, W., from 2.30 to 4.30 p.m.

Qualification required: A Certificate for three years' training from a voluntary hospital containing not less than 100 beds; preference will be given to nurses who also possess experience in fever, mental, children's or maternity nursing, or massage. Age, from 25 to 35.

#### OUR PRIZE COMPETITION.

##### QUESTIONS.

*September 25th*.—Describe the technique for taking blood for examination for typhoid bacilli. What are the special points to observe in the subsequent care of the patient?

*October 2nd*.—Describe the mechanism of the ear. For what conditions should the ears be syringed; describe methods of preparation.

*October 8th*.—State what you know about the Care of the New-Born Babe.



# The Midwife.

## CENTRAL MIDWIVES BOARD.

### LIST OF SUCCESSFUL CANDIDATES.

(Continued from page 140.)

#### PROVINCIAL.

*Leeds Union Infirmary.*—G. Briggs, F. M. Cooper, E. Preston.

*Leeds: St. Faith's Maternity Hospital.*—C. Mahon.

*Leicester Municipal Maternity Home.*—E. S. Beard.

*Leicester Maternity Hospital.*—G. H. Chapman, E. G. Coakill, E. M. Keyworth, L. Marriott, K. M. Tinsley.

*Leicester Union Infirmary.*—E. M. Hankins, O. A. Keal, K. Law.

*Liverpool Maternity Hospital.*—P. Ball, D. A. Brandwood, M. B. Butterworth, A. Clough, W. Cockburn, K. Cousins, S. A. Cozens, H. Firth, A. Forrest, F. M. Hughes, R. M. Jones, D. Lamont, F. Mills, A. J. Moses, F. Nicholls, M. R. Normandale, D. Pass, M. A. Rea, E. Smith, G. E. Steel, M. E. Sword, G. A. C. Waldron, E. Woods.

*Liverpool Workhouse Hospital.*—E. Bargh, O. Harrison, H. Lessels, E. A. O'Sullivan, B. L. Pope, E. G. Roach.

*Lincoln City Maternity Home.*—H. Tong, E. Wakelin, E. Wilkinson.

*Manchester: St. Mary's Hospitals.*—F. E. Beech, E. Bramhall, E. Broxton, D. Butterworth, C. O. Dare, A. Divine, H. Fearhead, D. V. Gardner, D. K. Graham, M. Hodgson, E. E. Hudson, A. Kershaw, M. E. Sanderson, E. Stubbs, B. Swindells, N. Waterfall, E. E. Watkin.

*Manchester Workhouse Infirmary and St. Mary's Hospitals.*—M. Butcher.

*Manchester Workhouse Infirmary.*—M. Ollerhead.

*Manchester Royal District Nurses' Home.*—B. A. Taylor, M. Wadsworth.

*Newcastle-on-Tyne Maternity Hospital.*—S. A. Clegg, E. A. Hodgshon, M. Turnbull, E. Welch, M. E. Wilkinson, N. B. Willson, C. Wilson.

*Norwich Maternity Institution.*—M. H. Thurgill.

*Northampton: Q.V.N.I.*—E. Brown, G. M. Evans, L. Harris, W. G. Hatton, E. Hodnett, M. McL. Jackson, S. C. Jones, L. E. Mayer, E. Smith, E. C. H. Stratton, M. I. Whitehead.

*North Bierley Union Infirmary.*—C. Fretwell, E. M. Gledhill, H. Robertshaw.

*Nottingham Workhouse Infirmary.*—C. G. Hardy, N. James, E. Matthews, A. M. Parr.

*Preston Union Workhouse.*—A. Rigby, M. A. Woodacre.

*Rochdale Municipal Maternity Hospital.*—I. Clegg, B. S. Meredith, M. I. Sixsmith.

*Royal Hants County Hospital.*—D. F. Davidson, F. L. Hillman, L. G. Smith.

*Selly Oak Union Infirmary.*—M. L. Lovatt, M. E. Rigby, M. Walmesley, A. Wood.

*Sheffield: Jessop Hospital.*—E. W. Bacon, M. W. Cleary, A. Silkstone, C. E. Woodward.

*Sheffield Union Hospital.*—F. M. Brown, O. Cawood, M. Fenwick, S. M. Howard, E. Jacques.

*Shorncliffe: Helena Hospital.*—L. Weale.

*Staffs. Training Home for Nurses.*—M. J. Cook, A. E. Eccleshall, J. Edge, E. M. Jackson, E. M. Oliver, E. Parker, H. Parker, W. H. Parry.

*Stoke-on-Trent Union Hospital.*—E. Farnell, M. Kelly, F. Morley.

*Sunderland District Nursing Association and Anita Richard Maternity Home.*—L. Gray, G. M. Hansom.

*Wakefield Union Infirmary.*—S. I. Lunn.

*Wakefield Municipal Maternity Hospital.*—G. E. Pace.

*Walton: West Derby Union Infirmary.*—W. M. Chamberlin, M. J. Dunbar, K. E. Thomas, H. E. Williams.

*Walsall Union Workhouse.*—S. J. Bayley, E. L. Paddock, M. E. West, H. Woodhead.

*West Riding Nursing Association.*—E. Gibson, E. Gillings, A. M. Horner, M. A. Shepherd, S. Whymark.

*Windsor: H.R.H. Princess Christian's Maternity Home.*—S. J. Beswick.

*Widnes: Queen's Nurses' Home and Liverpool Maternity Hospital.*—A. M. Jones.

*Widnes: Queen's Nurses' Home.*—M. E. Molyneux.

*Withington Hospitals and St. Mary's Hospitals, Manchester.*—C. Brierley, A. E. Elson, L. Hammond.

*Wills. County Nursing Association.*—B. A. Pearce, C. Smith, M. Speed.

*Wolverhampton Union Infirmary.*—A. M. Cull, A. E. Farrier.

*Wolverhampton District Nurses' Home.*—E. M. Newman, A. Twigg.

*Worcester County Nursing Association.*—C. Daubney, A. Ferguson, F. M. Poole, S. E. Skinner, G. A. Steadman, E. M. Turner.

*York Maternity Hospital.*—N. Galvin, L. A. Parish.

#### WALES.

*Cardiff: Q.V.J.N.I.*—E. Evans, C. Greenslade, G. Harding, F. J. Healy, G. Jones, L. L. Jones, G. Lewis, E. A. Scourfield.

*Cardiff Union Hospital.*—E. H. Jones, M. Saunders.

*Cardiff: King Edward VII Maternity Hospital.*—G. M. Evans, R. Johns.

*Merthyr Tydfil Union Infirmary.*—E. V. Gould. *Monmouthshire Nursing Association.*—A. E. Bird.

*Monmouthshire Training Centre.*—M. Davies, E. Isaac, E. B. Jones, B. Lewis, M. A. McGrath, C. S. Prosser, M. Vale, E. S. Vessel, M. Woolf.

*Newport (Mon.) Union Infirmary.*—O. M. E. Lingard, M. E. Murphy.

## SCOTLAND.

Edinburgh Hospice.—L. M. Terrill.  
Glasgow Royal Maternity Hospital.—E. Davidson, S. Reid.

## IRELAND.

Curragh Camp Military Families' Hospital.—M. E. Buckingham, M. Stubbings.  
Dublin: Rotunda Hospital.—A. M. North, F. M. O'Neill.

## INDIA.

Calcutta: Eden Hospital.—G. E. Hall.

## PRIVATE TUITION.

C. M. Ainsley, E. A. Barnett, E. Bond, F. A. Brown, D. Cooke, M. E. Coward, B. A. Heaven, E. Kavanagh, E. R. McKimmie, H. M. Paul, E. A. Peters, M. A. Sears, A. Sharples, M. Stephenson, B. Stilwell, M. A. Tristram, F. E. Warner, E. Webster, H. E. Williams, M. M. Williams.

## PRIVATE TUITION AND INSTITUTIONS.

General Lying-in Hospital.—E. E. Black, K. P. Mann.

Manchester: St. Mary's Hospitals.—O. Booth, C. Foley, A. Greenhalgh, M. Haddock, E. A. Jakes.  
Elizabeth Garrett Anderson Hospital.—D. Boreham, M. G. Cockburn, E. L. Holmes, A. Nelsey.

Birmingham Maternity Hospital.—A. M. Brown, M. Green, E. M. Kennerley, M. Webster.

Liverpool Maternity Hospital.—M. Craingold, L. Purvey.

Brighton Hospital for Women.—M. Cunningham.  
Toxteth Park Union Infirmary.—M. Davies.

Leeds Maternity Hospital.—M. Devlin, H. M. Moorhouse.

Steyning Union Infirmary.—B. K. Dolton, L. G. Smith.

East End Mothers' Home.—D. J. Dunlop.  
Kensington Union Infirmary.—E. S. Figg, B. Hill, F. Hughes-Hallett, P. Malden.

Norwich Maternity Institution.—H. M. Grant.  
Glasgow Eastern District Hospital.—E. M. McLeod.

Birkenhead Maternity Hospital.—J. O'Hara.  
Essex County Nursing Association.—S. Ozenbrook.

Nottingham Workhouse Infirmary.—S. C. Partridge, E. M. Wilson.

Salvation Army Mothers' Hospital.—M. Peters.  
Croydon Union Infirmary.—M. Mahoney, H. R. Slawson.

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

An examination qualifying for admission to the Roll of Midwives for Scotland will be held simultaneously in Edinburgh, Glasgow, Dundee and Aberdeen (subject to the number of candidates entered at each centre) on Monday, November 1st, 1920; Monday, January 31st, 1921. Entries to be lodged not later than one month before the date of the examination.

Examination Schedules and further particulars may be obtained on application to the Secretary, Mr. D. L. Eadie, 49, Lauriston Place, Edinburgh.

## CENTRAL MIDWIVES BOARD FOR IRELAND.

An examination for women seeking admission to the Irish Midwives Roll will be held in Dublin, Belfast and Cork simultaneously on October 12th, 1920, and following days.

Particulars from the Secretary, 33, St. Stephen's Green, Dublin.

## NOTES FOR MIDWIVES.

### SEXUAL MATURITY AND SENILITY.

The Note on Sexual Maturity and Senility: Recent Experimental Study, which appeared in the *Lancet* of September 4th, describing the researches of Dr. E. Steinbach, will be found extraordinarily interesting to midwives, and others who have studied Freudian psychology, which advances the theory that all psychic energy has its roots in sexual instinct.

### DANGER OF MERCURIC CHLORIDE DOUCHES.

The *Journal* of the American Medical Association reports three cases of poisoning following the use of mercuric chloride douches to prevent conception—two of the patients died. A case has also been reported in which the patient died from acute nephritis after inserting two 7.3 gr. mercuric chloride tablets into the vagina.

### INFLUENZA PATIENT MAY NURSE HER CHILD.

An Italian physician thinks that the nursing mother who is a victim of influenza need not cease nursing her child, unless there are grave complications. The nipples should be washed before nursing, and the mother warned against speaking or coughing while the infant is at the breast. The child should be brought into the room only for nursing.

### THE NUTRITION SPECIALIST.

Lack of knowledge of how to adjust income and food expenditures is holding many children back in normal development. Medicine can be of no lasting value until the diet is regulated; when this is done, medicine may be unnecessary. Food economics is a work apart from nursing, just as nursing is apart from the practice of medicine. The nutrition specialist in social work fills this gap.

## HOW TO HELP THE B.J.N.

1. Subscribe to it.
2. Send news to it.
3. Get advertisements for it.
4. Patronise our advertisers.

## A WORD FOR THE WEEK.

"There is no finer flower in this green earth than courage."

"Keep your face always towards the sunshine and the shadows will fall behind you."

# THE BRITISH JOURNAL OF NURSING

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Vol. LXV

## EDITORIAL.

### SAFETY FIRST.

*The Modern Hospital* had last month a "Symposium on Pharmacy for Nurses" in its Nursing Section, which is conducted very ably by Miss Carolyn E. Gray, R.N., and taking into consideration the numerous accidents which occur from ignorance in the administration and application of drugs, we studied this series of articles with interest. Mr. William Gray, pharmacist at the Presbyterian Hospital, Chicago, instructs each nurse for one month in the drug room. The work of the pharmaceutical department is altogether practical in character. The pupils receive instruction in materia medica from the professors in that subject at Rush Medical College. In the drug room they learn what is most important—pharmaceutical arithmetic; that is, they learn the real meaning of the figures and tables which they thought they had learned in the school room long before. Most important of all, they are taught what might be called the technique of applied common sense in the handling of drugs. All the pupils, as high school graduates, have learned their tables of weights and measures, and all have learned to translate percentages and decimals into vulgar fractions and vice versa. In the drug room is developed a sense of proportion—a sense of the mass relations between quantities, so that writing a decimal is not a mere mechanical placing of a decimal point, but the expression of a quantity which is felt to be small or large, whether expressed in common fractions or in decimals. Pupils are taught the value of exactness, they are taught to spell "gramme" instead of "gram," because the latter, hastily written by hand, might easily be read "grain." They are taught exact instead of approximate equivalents between the metric and apothecaries' systems. They are shown by demonstration that a drop is not always a minim, but varies according to the dropper and the viscosity of the liquid.

In the "applied common sense" or "safety first" division of the course comes instruction to avoid divided attention. "If, when one is reaching for a bottle on a shelf, for instance, someone else speaks, claiming the attention for the moment, the hand, unless arrested in its search, almost invariably takes the wrong bottle. We try to emphasize the importance of giving undivided attention to such tasks—or stopping at once if the attention is distracted. We teach our pupils not to depend on the appearance of the container or the substance it contains, but always to read the label, not merely once, but twice, once before taking out the dose, and once before replacing the bottle on the shelf." The writer believes that the educational value of the work is all the greater, since the purpose is not to pour into the minds of the pupils as large a mass of information as possible, but to vitalise what they do know—to wake them up. He asks, as nurses do not compound prescriptions on the floor: What is the gain to the hospital in teaching the methods of the pharmaceutical department?; and he replies: The gain to the hospital is chiefly in the better protection of the patient, and the better understanding and co-operation between the nurses and the department. He thinks nurses are sometimes inclined to be wasteful: whatever they want they must have, even if a submarine has to be chartered to fetch it; and they are sometimes inclined to order in extravagant quantities. They become more thoughtful in these matters after they have had practical experience; therefore, he feels that the time used in this work is well spent.

Miss Carolyn Gray endorses the plea for "safety first," and advises that physicians' orders to nurses should invariably be clearly written or printed, and not given verbally, as serious mistakes may result from misunderstood verbal instructions.

We are entirely in agreement with her claim thus to protect the patient and the nurse.

## OUR PRIZE COMPETITION.

MENTION ANY TWO SURGICAL CONDITIONS WHICH MAY FOLLOW INFECTIOUS DISEASES. DESCRIBE FULLY ONE OF THEM. IF AN OPERATION SHOULD BE NECESSARY, DESCRIBE IN DETAIL HOW YOU WOULD PREPARE THE PATIENT.

We have pleasure in awarding the prize this week to Miss Marion Zeigler, Castleton Road, Barons' Court, S.W.

### PRIZE PAPER.

Almost every infectious disease has its fear of complications; in spite of the most skilful treatment and good nursing they may occur.

We will take for example:

- (a) Acute Mastoid Abscess following Scarlet Fever.
- (b) Perforation of the intestines in Enteric Fever.

### SCARLET FEVER.

The early complications are membranous sore throat, rhinitis discharge from the nose, and conjunctivitis and later Otitis Media and discharge from the ear, which may lead to the serious condition of Mastoiditis.

### MASTOIDITIS.

The middle ear is a small cavity which exists between the drum and the nerve mechanism of hearing. It is bridged across by the three small ossicles, and it communicates with the naso-pharynx by the Eustachian tube and with a cavity in the Mastoid process behind the ear. It is in this way infected by the septic inflammation which ascends from the throat in scarlet fever by means of the Eustachian tube.

The middle ear then is filled with pus, the pressure of which causes earache and which soon bursts its way through the drum and escapes as a stinking discharge by the external ear.

Sometimes this condition of Otitis Media may be cured by a timely incision, but more often it remains as a chronic septic condition with a constant purulent discharge. In such a case, at any moment the septic process may spread backwards into the Mastoid process or inwards to the lateral sinus or brain.

The involvement of the Mastoid causes:—

1. Pain.
2. Redness.
3. Swelling behind the ear,
4. Rise of temperature and increased pulse rate, setting up a condition of Mastoiditis and necessitates an emergency operation to relieve the condition.

To prepare the patient for operation of Mastoid:—

1. Half-shave the head from centre back according to the side affected.

2. Well clean up the skin over the shaved area with methylated ether.
3. Thoroughly clean up the lobe of the ear, being specially particular of the skin behind.
4. The iodine method for painting the skin is particularly useful in these cases.
5. Apply sterile towels and secure in position by a bandage.
6. Put the patient in a loose warm gown, preferably to fasten at the back, and one that will conveniently loosen around the neck; also a pair of long woollen stockings.
7. Instruct the patient to pass urine if possible, which should be tested before the operation. Anything abnormal with regard to it should be reported to the surgeon before the operation.
8. If an hypodermic injection of Atropine or Hyoscine has been ordered it should be given a quarter of an hour before the operation. The preparation should be done as quickly as possible, but with much calmness, so as not to alarm or upset the patient.

### ENTERIC FEVER.

Enteric or Typhoid, as it is often called, is a specific infectious disease. The fever has received various names:—

1. Gastric fever.
2. Abdominal Typhus.
3. Infantile fever.
4. Remittent fever.
5. Slow fever.

Subsequently all doubt upon the subject was removed by the careful clinical and pathological observation made by Sir William Jenner at the London Fever Hospital. It has been completely proved that a bacillus known as "Bacillus Typhosus" is the direct cause of the malady.

The part attacked is called "Peyer's Patches," a mass of granular tissue situated in the small intestine near the Ileo-cæcal valve. During the course of the fever the intestine undergoes a series of changes. Perforation usually occurs in the third week when the intestine is healing. The slough which covers one of the ulcers, or perhaps several, separates and sometimes the peritoneal layer of the bowel wall is involved in the slough, so that where it separates a hole is left. Faecal matter gets into the peritoneal cavity, usually setting up severe peritonitis.

The symptoms of this serious complication are often not very severe, and the most careful

observation is necessary in order that they may not be overlooked, as on an immediate surgical operation depends the only hope of the patient's recovery.

#### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Winifred M. Appleton, Miss Susan Lambert, Miss Josephine Carey.

#### QUESTION FOR NEXT WEEK.

Describe the technique for taking blood for examination for typhoid bacilli. What are the special points to observe in the subsequent care of the patient?

### NURSING ECHOES.

October will see the activities of the various groups of organised nurses in full swing, the officials, we may hope, refreshed and invigorated by an enjoyable holiday, of which they were all greatly in need.

The General Nursing Council meets again on Thursday, September 23rd, at the Ministry of Health, and it has very responsible matters to discuss. The Royal British Nurses Association and the various unions are arranging autumn programmes.

The Registered Nurses' Parliamentary Council opens its new legislative campaign on October 8th, and rank for Service Nurses is to have first consideration. Let us hope the powers that be will not oppose with obsolete "anti" tactics as they did over Registration. Anyway, if they do, they are sure to be beaten in the future, as they were in the past.

For the first time for years, the Assistant Editor of the *B.J.N.* is taking the sort of holiday her heart loveth, and as the guest of Miss du Sautoy and Lady Hermione Blackwood, is in France seeing something of their wonderful reconstruction work under the Comité Britannique C.R.F. at Rheims, where, with a most efficient unit, the great value of their skilled ministrations is amply apparent. More is the pity that now that the lease of their headquarters has run out, it is probable that their systematic and excellent work will cease. Money—money—devastated France needs and deserves money all the time, to help restore its ravaged places. The Municipality of Rheims, we hear, would provide central quarters where anti-natal and post-natal clinics and other preventive work could be carried on, and four centres in the various parts of the town, also wood, electric light and telephones, and may be other things; but they cannot provide board

and salaries for a skilled staff, as they have no money to do it with. It is calculated that the total cost for running such centres for a year, both for preventive work and district nursing, would cost about £1,500, and it does seem tragic that the excellently organised work should cease for want of so small a sum!

In England it is very difficult for those who have never seen ravaged France to realise the extent of her injuries. It is not only in bricks and mortar that the unspeakable Hun has left his mark. How about the nervous systems of the people who were subjected to the horrors of bombardment for years? Imagine the mental strain on the mothers, the shattering of the constitutions of children, not only from shock, but want of food. Sympathetic Miss Breay, of course, would have us find £1,500 by return of post! Would that we could! We repeat what we have said before that not a penny should we be taxed to entertain in England for a year in luxury, the children of our foes, so long as money is so urgently needed in France by the victims of their inexpressible villainy. "It really is a compliment to English nursing," writes Miss Breay, "that Rheims should want to keep this splendid unit. I do wish something could be done." So do we. Personally, we should like to impound the banking accounts of the golorious Jews of German antecedents, luxuriating in our midst.

On Monday, Miss Breay paid a visit to Verdun (where the echoes of the French guns still crash their defiant *Ils ne passeront pas* to ears which can hear), and will visit other historic places on the way to Paris. We feel sure she will have something of value to tell us upon her return.

Miss E. A. Maynard has by her will bequeathed £5,000 to the Ranyard Mission, of which she was a generous supporter. It has come at a very opportune moment, to prevent serious curtailment of the work. This Mission, which has its headquarters at 25, Russell Square, W.C., has been established for 63 years, and has 85 trained mission workers and 85 district nurses working in different parts of London. Ranyard Nurses, after full hospital training, have instruction free in district training, and by lectures. These devoted women are real friends of the sick poor in London.

*The Globe* is doing us good service in enlightening the public as to present nursing conditions. Alas! if only the daily press had

not boycotted the question all these years (when the *B.J.N.* was the only organ dealing faithfully with it) we might have had our Nursing Council twenty years ago, and been already highly organised for our responsible public duties.

Under the heading of "The Lay Press and the Nursing Profession," the commercial, lay-edited *Nursing Mirror*, posing as a professional organ, has the impertinence to criticise the *Globe* exposures! Making huge profits as it has done by inserting advertisements from, and supporting the policy of, the anti-registration hospitals and nursing institutions responsible for present conditions, the irony of this is apparent to the meanest intelligence. We are not surprised that the editor of *The Globe* delivers the "retort courteous" with telling effect!

During a discussion at a recent meeting of the Cardiff School Management Committee as to whether an increment of £5 should be granted a nurse, Alderman F. G. L. Davies remarked: "It is shameful to consider such a thing. Nurses are badly treated; they receive wages we would not give to a docks office boy." The Committee left the matter in the hands of the managers.

We are strongly opposed to coercion, either from Committees or officials, where nurses are concerned. Whether they join an organisation or not should be entirely at their own will and pleasure.

Recently the Bermondsey Borough Council and Board of Guardians announced that only trade union members would be employed, and the infirmity nurses and health visitors were given no option but to join the National Union of Corporation Workers, which is specially concerned with the welfare of dustmen and road-menders. Eventually, after protests, the National Association of Local Government Officers was recognised as a trade union, and, as many of the Council's professional employees belong to this body, they had no longer to rub shoulders with the dustmen—not that we wish to depreciate these very useful municipal workers for a moment.

Even then, as the Nurses belong to various organisations—outside Poor Law influence—they are circularising Boards of Guardians desiring to have their professional unions

recognised for arbitration purposes. Here they are again met with intolerance from Boards of Guardians and their officials. Many Poor Law Matrons have used influence not far short of coercion to compel their nurses to join the College of Nursing, Ltd., and have warned them against joining the National Union of Trained Nurses, and especially against the Professional Union, which is registered as a trades union.

Thus we note that the Kensington Board of Guardians, at a recent meeting, treated with contempt, and agreed to take no action, on the courteous communication received from the Professional Union of Trained Nurses, which asked for recognition, and also to be allowed to interview the nurses and place their policy before them. Why this unfair discrimination? The Guardians have made no objections to the College Company placing its policy before the nursing staff, nor to the Matron urging personally and in print that the nurses should pay up their guineas and join the College. Why, therefore, should they boycott a *bona fide* nurses union?

Mr. H. Harcourt-Smith, who moved that no action be taken on the letter received, gave as his object in doing so that the employees be left free to join which union they liked, and expressed the pious opinion that it was not for the Guardians to say to their officers that they should join a particular union. Quite so. Neither is it for the Guardians to permit their officials to adopt this unjustifiable policy. In our opinion the Kensington Guardians should allow the nursing staff perfect freedom in this connection, and not prevent them, as they did in this instance, from hearing the views of their colleagues, other than members of the College of Nursing, Ltd.

We hope Mr. Lyne, who appears to be a fair minded member of the Board, will enquire further into this matter, and insist upon absolute freedom for the nursing staff to hear all sides of questions concerning the organisation of their profession.

Whether or not the governors of a voluntary hospital have a right of access to reports concerning its management was fought out at the Cumberland Infirmary, Carlisle, at a quarterly meeting of the governors last week, with the result that it was decided that a report dealing with the grievances of the nurses and the management of the Infirmary should be at the disposal of the governors in confidence, together with the report and recommendations of a sub-Committee in the matter.



For some time past there has been friction at the Cumberland Infirmary. Twenty-seven nurses and probationers in the institution signed a round robin formulating their grievances. Those grievances were dealt with by the committee, and, after many meetings, considerable concessions were made. Final peace, however, was not achieved, and the committee asked for the assistance of an arbitrator. They secured the services of Sir Napier Burnett, who interviewed nurses, members of the staff, and some governors from the outside, and, after the delay of some five weeks, he rendered his report.

That report, which was very full, dealt with the grievances and, which was important, also with the management of the Infirmary. He made various suggestions. Some were practicable, but others, owing to the financial condition of the Infirmary, were not considered to be so. This report, contended Dr. Lediard, should be at the disposal of the governors.

Considerable discussion followed. Mr. Allan Hodgson, chairman of the Committee of Management, held that it would be prejudicial to the interests of the institution and to the parties mentioned in the report if it were made public.

Let us hope that one result of publicity will be reform in the nursing department. It sadly needs bringing up-to-date, and has lagged behind for a very long time.

The first National Conference of the Irish Nurses' Union was held at Larch Hill, the Irish Women Workers' Hostel, Rathfarnham, County Dublin, on September 3rd and 4th, under the chairmanship of Miss L. Bennett, Secretary of the Irish Women Workers' Union. Twenty-four delegates attended from all parts of Ireland, representing nurses in Union hospitals, tuberculosis, baby clinic, and other public health services, nurses in private practice, and midwives in dispensary and private practice.

Mr. T. R. Johnson, the Secretary of the Irish Labour Party, welcomed the delegates on behalf of Irish Labour, and dwelt on the necessity for effective organisation in view of the great extension of public responsibility for health services which would inevitably develop in the future.

Improvements in salaries and other conditions already secured were reported, and the necessity for a reduction in hours of duty was discussed. New rules were adopted, and Executive Committees for the Nurses' and Midwives' Sections were elected.

## PAY OF ARMY NURSES.

An Army Order just issued from the War Office announces the new rates of pay and retired pay of the Q.A.I.M.N.S. and of the permanent nursing establishment of the Military Families' Hospitals.

The new annual rates of pay of the Q.A.I.M.N.S. are as follows: Matron, £115 minimum, rising by £10 yearly to a maximum of £185; Assistant Matron, £85, rising by £5 a year to £95; Sister £75, rising by £5 to £85; and Staff Nurse, £60, rising by £2 10s. to £65. The new annual rates for the nursing staff of Military Families' Hospitals are: Matron at Aldershot, £115, rising by £10 increments to £185 maximum; Matron at other stations, £75, by £5 to £85; and Charge Nurse £60, by £2 10s. increments to £65. These rates have effect from April 1st, 1920. In addition to these rates, charge pay for Matrons of Q.A.I.M.N.S. will be at rates not exceeding £45 a year; and for Matrons at Military Families' Hospitals, at stations other than Aldershot, £20 or £30 a year according to the number of beds.

Retired pay will comprise a service element based on total service (£3 for each year of service) and a rank element for the rank from which the nurse retires; but a nurse retiring with less than ten years' complete service will not be eligible for retired pay. The maximum rates of these two elements together are as follows: Matron, Q.A.I.M.N.S. and at Military Families' Hospital at Aldershot, £170; Sister Q.A.I.M.N.S. and Matron of Military Families' Hospitals at stations other than Aldershot, £75; and Staff Nurses and Charge Nurses (Military Families' Hospital), £55. These rates will have effect from April 1st, 1919.

The rates of pay and retired pay of Matrons-in-Chief and principal Matrons are still under consideration.

## NATIONAL UNION OF TRAINED NURSES.

Miss H. L. Pearse, President of the National Union of Trained Nurses, will speak on September 17th, at 6.30 p.m., on "The Hours of Employment Bill," at 46, Marsham Street, Westminster. As soon as Parliament reassembles the discussion as to whether professional nurses shall or shall not be included in it, is likely to arouse a good deal of interest. Many nurses wish to be included but hospital managers prefer "no State interference." This was their reason for opposing State Registration for a quarter of a century.

## PRESENTATION.

A presentation has been made to Nurse A. Emby, who, after sixteen years as District Nurse at Wallsend, is leaving the borough. Mrs. Hope, of West View, handed to Nurse Emby a wallet of Treasury notes subscribed by friends, patients and tradesmen of the town as a token of the love and esteem in which she was held.

# Royal British Nurses' Association.

(Incorporated by



Royal Charter.)

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**THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.**

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## TO THE MEMBERS.

Now that the holiday season is drawing to its close, we would remind our members that we shall be grateful for any help which they can give us in connection with the various activities of the Association. Next month we propose to commence again to hold conferences on subjects of interest to nurses and there are large numbers of our members competent to contribute papers of high educational value. We shall be glad to receive the names of those who are willing to do so and, further, if any members will let us know of any subject on which they would like us to hold a conference we shall have pleasure in arranging for this.

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## THE TRAINED NURSES' ANNUITY FUND.

The Sale of Work for the Trained Nurses' Annuity Fund will be held in November and Miss Isabel Macdonald, Hon. Secretary of the Fund, will be glad to receive gifts for this. A number have already been forwarded to the office but, up to the present, we have not received a sufficient quantity of work to ensure that the sale shall be as successful as that of last year. It is our desire to make this fund self-supporting by the profession for the profession, because public appeals on its behalf are likely to injure younger nurses who are still at work. Professional begging always leads to professional beggary and, while we fully realise that the claims of those who have fallen on evil days cannot be disregarded, we maintain that if every nurse in England would give even a small donation annually, they could very easily maintain their own benevolent schemes. We are arranging to have our sale of work rather late in the year in the hope that, as they did last year, the nurses will buy their Christmas presents at the sale.

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## THE R.B.N.A. MEMBERS CHRISTMAS CARD.

We propose to arrange to have a reproduction of the banner of the Association done in colour as a Christmas card. This will only be procurable from the Association's office and will be supplied to those only who belong to it, so that, in a sense, they will be able to regard it as a private card and by using it will be able to save themselves

the trouble of following what is the usual course of some of the members, having their own cards printed. It will be something of a novelty to send to their friends a card decorated with a reproduction of the beautiful banner and the crest of their Royal Corporation. As it is necessary that we should have some idea of the number of cards to be ordered we shall be glad to hear from the nurses what number they are likely to require. We have not yet been able to ascertain the exact cost of the cards but hope to have this information during the coming week.

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## THE PSYCHOLOGY OF FAILURE.

"What is truth?" asked Pilate. Fittingly on the same occasion, and at all times, might it have been asked, "What is failure"? Looked at in the perspective lent by the passage of time many of what appeared in their own age to be the greatest failures have proved to be brilliant achievements. And more striking still is the fact that very many of the best things gained for a nation, a community, or for some special class have been brought about by people whose lives from the personal point of view, were complete failures. On the other hand, how much may have been lost to the world by the disinclination of most individuals to face any effort or sacrifice of which the results may end in loss or failure from the personal point of view or of which the harvest to be reaped must lie in a far distant future beyond the limits of a lifetime of those who have sown the seed. The ancient Vedântist, with his clear vision and deep mystical understanding, was, in this respect, far ahead of present-day civilisation. He loved to seek life and estimate the values of life, not from the prisoned, introspective standpoint that takes account merely of the welfare of the individual. His vision and his dreams were of a longer range, and, even if he lived in obscurity, his aim was to play well his part in the upbuilding of the great, ancient Eastern civilisation. Much we may also learn from his views of the power of thought and will; an echo of his creed in this connection we find often in the writings of that most profound of modern mystics, Robert Browning, when he tells us, in his own beautiful way, that all we have dreamed, or willed or thought of good shall exist, not as mere semblance but as itself, that "when eternity affirms the conception of an hour" the beauty and the good will be found to

have survived the melodist who sent them forth, and "though the high may have proved too high, the heroic for earth too hard," the results will nevertheless be achieved, and there shall be heard the melody of all courageous effort by and by.

But it is not so much of the ethics of effort and of failure that we would write in the present article, as of the results of the latter on the individual from a psychological point of view. Daily we meet with people who "come with phrases nice and modest air to ask advice," and almost invariably, when this is tendered, the answer comes, "Oh, I could never accomplish that," or words to a similar effect. Inclination would draw them in one direction while fear serves to keep their feet in the beaten track wherein chance has set them. They cannot risk failure and yet they do not realise that they may actually lose far more through fear than through failure. For, more often than not, it is the case that through failure we ultimately succeed just as it is that through honest doubt we learn. The book that failed to circulate, the music which never found its way into the concert hall, the picture that was never "hung" have, all of them, been worth while because of their psychological effects on those who produced them. They helped to educate faculties, were steps of progress even when they failed to please. There is too great a tendency to regard every effort as failure which does not bring applause or material gain. Says Marcus Aurelius, "When thou hast done a good act and another has received it, why dost thou still look for a third thing besides, as fools do either to have reputation . . . or to obtain a return?" Human nature is much the same to-day as in the times of that old-world sage and it is hard to be content with two things, still more to be content with effort alone. Yet there is no better form of mental hygiene than the power to find contentment in effort, whatever the fruits of it may prove to be. Often, on the ruins of such effort, a fresh venture is begun and success arises by the education that failure has given. But education is not the only result of failure, for the latter tends to foster patience and independence, and indeed the more one comes to study the psychological results of failure, the more it is to be doubted whether such a thing as failure need really exist, because, when rightly accepted, it tends to lift one into a loftier atmosphere and a more perfected existence.

There certainly is no such thing as standing still, and the real failures are those who have never made any effort beyond what they feel to lie strictly within their power. They are bound in the long run to stand on a lower plane than many of those whom the world regards as failures because they have never tried and failed, never gained the experience and characteristics which enterprise and failure bring, and so it is that they lack certain subtle qualities and much of the originality and independence which mark the men of high endeavour, "failures" even though they may be. It is held by some that, in a dim,

age-long past, man lived but in a sort of sleeping consciousness, that he acted entirely on impressions from without and had neither volition nor intellect of his own. To-day he is possessed of both, but to develop them to their highest he must learn self-reliance and a certain divine indifference to the opinions of those about him; only by inspiration and effort high enough in their ideals to challenge failure, can such development progress.

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### OBITUARY.

It is with deep regret that we have to report the death of Miss Cordelia Duffield, an early member of the Association. Miss Duffield trained at St. George's Hospital and has always taken a very keen interest in her Association. Her death took place after an illness of a few hours.

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### "BE A BRICK."

In order to stimulate interest in the collection of funds of which they are, needlessly to say, badly in need, the Royal Surgical Aid Society has designed a novel collecting box exactly reproducing a brick. The work of this Society is too well-known to need any recommendation. During last year it relieved 18,979 cases. Its work is now seriously hampered from two causes: (1) the enormous increase in the cost of appliances, (2) a disastrous fire during the latter part of the war which destroyed an important part of its headquarters.

The Society appeals to each one to "Be a Brick," to take a brick, and thus help to build up the deformed, the stricken, and the maimed.

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### USEFUL LECTURES.

The National Association for the Prevention of Infant Mortality and the Welfare of Infancy has arranged three courses of lectures:—(1) An elementary course on infant care for infant welfare workers, teachers, mothers, &c., to be given at Morley Hall, George Street, Hanover Square, W., on Mondays from 6 to 7 p.m., from September 27th to December 13th. (2) A special course on infant care for health visitors, nurses, midwives, school teachers, voluntary infant welfare workers, committees of nursing associations, &c., in the Lecture Theatre, University College, Nottingham, from September 20th to 24th. (3) Advanced lectures on infant care specially intended for creche nurses and probationers, at Essex Hall, Essex Street, Strand, W.C., from September 30th to December 16th. Further information is available from Miss Holford, Secretary, 4 and 5, Tavistock Square, London, W.C. 1.

ISABEL MACDONALD,  
Secretary to the Corporation.

## APPOINTMENTS.

### MATRON.

**Dudley, Guest Hospital and Eye Infirmary.**—Miss Dorothea Watson has been appointed Matron. She was trained at Leicester Royal Infirmary, where she has since been ward sister. She has also held the position of sister at the Norfolk and Norwich Hospital, Assistant Matron at the City of London Hospital for Diseases of the Chest, Matron of Newark General Hospital, and Assistant Matron at the Royal Infirmary, Bradford.

**Carlisle Fever Hospital.**—Miss Jeanette Froud has been appointed Matron. She was trained at the Dumfries and Galloway Royal Infirmary, and has held various appointments. Recently she has been matron of Norman's Riding Infectious Diseases Hospital.

**Burton-on-Trent Isolation Hospital.**—Miss Kate Boyes has been appointed Matron. She was trained at Liverpool City Fever Hospital, and Wolverhampton General Hospital, and has since been Matron at Keynsham Isolation Hospital and of Famfield Isolation Hospital and Sanatorium.

**Kelso Dispensary and Cottage Hospital.**—Miss Helen Johnston has been appointed Matron. She was trained at Edinburgh Royal Infirmary. As a member of the Territorial Force Nursing Service she served as Staff Nurse at the 2nd Scottish Hospital, Edinburgh, and in France and Belgium. Miss Johnston has since been Assistant at the Lawson Memorial Hospital, Golspie.

### SISTER.

**Birmingham Maternity Hospital.**—Miss Ruth C. Heath has been appointed Sister. She was trained at the Salvation Army Hospital for Mothers, and at the Great Northern Central Hospital, where she held the positions of Ward Sister, Night Sister, and Holiday Assistant Matron.

**Elizabeth Garrett Anderson Hospital, Euston Road, N.W. 1.**—Miss Adela Whitelaw has been appointed Sister. She was trained at the Lincoln County Hospital, where she was Sister, and has been staff nurse at Endell Street Military Hospital, and in the Territorial Force Nursing Service. She has also served under the Lindsay County Council, Lincolnshire.

**Royal Hospital, Chesterfield.**—Miss A. A. Webb has been appointed Sister of the men's surgical ward. She was trained in the same institution, where she subsequently held positions of responsibility. She has also been trained in infectious nursing at Seacroft Hospital, Leeds, and has had experience of private nursing.

Miss E. E. Birch has also been appointed Sister of medical wards. She was trained at the Royal Hospital, Chesterfield, and been Sister of the Military Wards at the same hospital, and at the General Hospital, Wolverhampton.

**Huntingdon Tuberculosis Sanatorium for Women and Children.**—Miss Mary B. Charlesworth has been appointed Sister. She was trained at the London Hospital, E.

## RESIGNATION.

We are informed that Miss Jentie Paterson, who resigned from the Executive Committee of the National Union of Trained Nurses last autumn, in order to join the new trade-union for nurses, has now resigned membership of the N.U.T.N.

## THE PROFESSIONAL UNION OF TRAINED NURSES.

As so many authorities and medical officers of health have applied to the Professional Union of Trained Nurses for the scale of salaries approved of by the union, a special meeting of the public Health Section was called on Friday, the 10th inst., to revise the scale.

The attendance was specially large, and the members very interested.

A copy of the scale decided upon was sent to the Minister of Health, and several other authorities, with the following addendum:—"That no certificated trained nurse in, or to be hereinafter appointed to, the Public Health Service, should rank as an assistant in any branch of the Public Health Service."

### THE HOURS OF EMPLOYMENT BILL.

A special meeting of the Provisional Committee of the P.U.T.N., was convened for Wednesday, September 15th, at 5.30 p.m. to consider the Hours of Employment Bill as it affects nurses.

## HELP FOR THE DISABLED.

The Duke of Northumberland, opening the new Orthopaedic Hospital at Newcastle, last week, said it was quite impossible to exaggerate the importance of such an institution. The whole country was flooded with disabled ex-Service men, and the community was, in duty bound to see that everything possible was done not only to provide them with employment, but to restore them to such a measure of health and strength as was possible. We were apt to forget that if it were not for the immense progress made in orthopaedic surgery at least half of these men, for whom his Majesty was now appealing, would not have been employable at all.

The buildings which are an extension of the Royal Victoria Infirmary, and connected with it by corridor, are of stone and brick. They occupy 15 acres of land on the Castle Leazes, and have cost £160,000 to erect. Towards this, £148,000 have been subscribed. There are 500 patients now in the building, and there are 1,200 out-patients. At present wounded and maimed soldiers are being treated, but later the hospital will be available for those injured in the great local industries.

The hospital is at present under the control of the Ministry of Pensions, and will be at all events for three years. At the end of that time the position will be considered.

Colonel D. Wells Patterson is chairman of the Orthopaedic Committee, and Colonel Bissell is Medical Superintendent, and together with the citizens of Newcastle they have a right to feel great pride in this splendid new institution to serve as the Northern Orthopaedic Centre.

Miss Emily Caroline Jeffreys, Loretta, South Ascot, Berks, left £14,295. She bequeathed, after a number of personal bequests, the residue of

her property to the British Women's Hospital at Richmond for totally disabled soldiers and sailors injured in the war.

A history of the Asylum War Hospitals in England and Wales, compiled by Sir Marriott Cooke and Dr. D. C. Hubert Bond, Commissioners of the Board of Control, has been issued as a White Paper (Cd. 899). In all 24 asylums were turned into war hospitals, which provided, with some hutments, 27,778 permanent beds. The number of patients treated in them up to May this year was 482,949, approximately equivalent to more than one-sixth of the total number of sick and wounded men from all fronts during the war.

### OUTSIDE THE GATES. THE WOMEN'S PROTEST.

The determination of women to avert a miners' strike is growing rapidly. Resolutions of protest against it are now pouring in to the National Political League headquarters from every part of England and Scotland. The date of the League's Conference is now fixed for Wednesday, September 22nd, at the Central Hall, Westminster. Miners' wives from every coalfield area will be present as well as wives of transport workers and railwaymen. All communications should be addressed to Headquarters, National Political League, Bank Buildings, 16, St. James's Street, London, S.W.1.

### WHAT EVERYONE IS READING.

Everyone who possibly can do so is reading "The First World War, 1914-1918": The Diaries of Lieut.-Colonel C. A. Repington.

"Through Bolshevist Russia." By Mrs. Philip Snowden.

"German War in the Air" in the *Times* articles, which are based on a remarkable book entitled "The German Air Force in the Great War," and which give a vivid impression of the Force, as it affected Britain during the war.

### COMING EVENTS.

September 17th.—National Union of Trained Nurses: Discussion on "The Hours of Employment Bill." Miss H. L. Pearce (the President) will speak.

September 22nd.—National Political League. Conference to avert a miners' strike. Central Hall, Westminster, S.W.

September 23rd.—General Nursing Council for England and Wales. Meeting at the Ministry of Health, Whitehall, S.W. 1.—2 p.m.

October 8th.—Registered Nurses' Parliamentary Council Meeting. 431, Oxford Street, London, W. 4.30 p.m.

October 12th.—Flower Day in London in support of the Edith Cavell Homes of Rest for Nurses.

October 12th and following day.—Central Midwives Board for Ireland Examination, Dublin, Belfast, Cork. Particulars from Secretary, 33, St. Stephen's Green, Dublin.

## THE DIARY OF OPAL WHITELEY.\*

### "SACRED IN ITS REVELATION OF A CHILD'S SOUL."

"As I did go I did have hearings of many voices, they were the voices of the earth glad for the spring. They did say what they had to say in the growing grass and in the leaves growing out from the tips of branches. The birds did have knowing and sang what the grasses and leaves did say of the gladness of living. I, too, did feel glad feels from my toes to my curls."

This book, just published, promises to be one of the most widely discussed of the season. And with good reason. It is the genuine authentic diary of a child of between six and seven years' old, written about fourteen years ago. The young authoress is ignorant of her history, but she dimly remembers the "Angel Mother" and "Angel Father" of whom death robbed her in her fifth year. How she came to be adopted by the Oregon lumber man and his wife is not known, but it was under their roof that this diary was written.

Lord Grey of Fallodon who writes the introduction, is of opinion that from her reminiscence her parents were two persons of rare beauty of mind and feeling, and in the preface by Mr. Ellery Sedgwick, it is concluded that she is of French origin; and it is a reasonable inference that her father was a naturalist by profession or natural taste.

She possessed two precious little copy books which held their photographs, and into which her mother had taught her to set down all she had learned both of the world about her, and of that older world of legend and history with which the diarist shows such capricious and entertaining familiarity. These valuable records were taken from her at the age of twelve for reasons beyond her knowledge.

Her astounding knowledge of the names of the good and great is probably due to the notebooks left by her parents.

Her own diary, the work of many years, was torn up in a fit of temper by her foster sister, and this book is the outcome of the fragments collected by the child, and which have been pieced together with marvellous patience and skill.

A necessary appendage of the book is a list of the characters in the diary, which the reader will be glad to consult from time to time as our extracts will show.

The task of making these extracts is a difficult one, for the whole book is one of rare charm and delight; and the flights of imagination of this little lonely disciple of St. Francis, are as delicate and subtle as the dust on the wings of a butterfly. At one moment the reader will be moved to tears by the pathos of the child's rough usage and the next will break into smiles at the delightfully humorous situations she creates.

The first chapter gives an outline of her life with the lumber man's wife. "One way the

\* London: G. P. Putnam's Sons, Ltd.

road does go the way I go when I go to the school house when I go to school. Around the ranch house are fields. When the mowers cut down the grass they do also cut down the corn-flowers. I follow along and I do pick them up." She makes them into a *guirlande* for William Shakespeare, a grey horse, "whose ways are ways of gentleness. I talk to him about the one he is named for. And he does have understanding."

Here is a typical passage: "After the mamma had switched me for not getting back sooner with the milk, she told me to fix the milk for the baby. the baby is now in bed asleep. The mamma and the rest of the folk is gone to the ranch-house. When they went away she said for me to stay in the doorway to see that nothing comes to carry the baby away. By the step is Brave Horatius (the shepherd dog). At my feet is Thomas Chatterton Jupiter Zeus (a most dear velvety wood rat). I hear songs—lullaby songs of the trees. The back part of me feels a little sore, but I am happy listening to the twilight music of God's good world. I'm real glad I'm alive."

The trees growing along the lane are all her friends. "I call them Hugh Capet, Saint Louis, Good King Edward I, Charlemagne, and the one where the little flowers talk most is William Wordsworth.

"I stopped to night to give each a word of greeting. I am printing this sitting on the wood box where the mamma put me after she spanked me after I got home with the milk. Now I think I shall go to the bedroom window and talk to the stars. They always smile so friendly. This is a very wonderful world to live in."

The day she took Peter Paul Reubens (the young pig) to school, because when he followed her a lump came in her throat and she couldn't tell him to go back to the pig-pen. The new teacher "did look long looks at me"; she said "I'm screwtineyesing you! It is a new word. It does have an interest sound. I think I will have uses for it."

Nothing in nature came amiss to the child; in all she found delight. Her work was to pick up the potatoes as they were dug and pile them in piles. "Some of them were plump. All of them wore brown dresses. Potatoes are very interesting folks. I think they must see a lot of what is going on in the earth; they have so many eyes. All the time I was picking them up, I did have conversations with them." She thought of their growing days and all the things they did hear. "Earth voices are glad voices." She remembers that this is the going away day of St. Francis of Assisi and the birthing day of Jean François-Milet. So she took as many potatoes as they years did dwell upon the earth. "I did think to have a choir: First I did sing 'Sanctus, Sanctus, Sanctus Dominus Deus.' There was a good number of folks in the choir—all potato folk wearing brown robes. Then I did sing one 'Ave Maria.'" The choir and those commemorated would have

probably gone on interminably, but the "chore boy gave me three shoulder shakes, and he did tell me to get a hurry on me and get those potatoes picked up. I did so in a most quick way." Poor little dreamer! "Being a potato must be interest—specially having so many eyes. I have longings for more eyes."

How sweet the picture of the calf, Elizabeth Barrett Browning, and the child putting her arms round its neck, because "there was a lonesome feel in her mooings"; or when it on hot days wears her sun-bonnet—"It does so help the sun from hurting her beautiful eyes." How tragic the butchering of Peter Paul Reubens, who used to grunt "Amen" at her cathedral services! How brutal the soul that made her make the sausage "where every time I did turn the handle I could heard the little pain squeal." She would go into the wood and search for his soul.

Solomon Grundy, his successor was christened in a robe made of a new dish towel, for which her "ears were slapped until I thought my head would pop open." Solomon Grundy had previously a warm bath and was sprinkled with the baby's talcum-powder. Perhaps her greatest undertaking was christening of the twelve little chickens who were all arrayed in christening robes, which she sewed when she was under the table for a punishment.

Minerva, the mother, wore a little white cap tied under her bill. We, alas! have no space to describe the kindness of the "man that wears grey neckties and is kind to mice"; or to tell of the shadows that touched the blind girl with their velvet fingers. We cannot describe the death of the grey horse, William Shakespeare, that she had "lonesome feels" for, but is glad he can't be whipped any more. "There are little blue *fleurs* a-blooming where he did lay him down to sleep." But we urge our readers to read for themselves—this book, so imaginative, so instinctively religious, so pathetic and appealing. So sacred in its revelation of a child's soul.

Her naughtiness, for which she is continually being spanked, only adds to the fascination of her character, for it is always the overflowing of her enquiring and eager temperament. Truly it may be surmised, "Of such are the kingdom of Heaven."

H.H.

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### WORD FOR THE WEEK.

"Bring me men to match my mountains,  
Bring me men to match my plains;  
Men with empires in their purpose  
And new eras in their brains."

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Love therefore labour; if thou should'st not want it for food, thou may'st for physic. It is wholesome for the body, and good for the mind; it prevents the fruit of idleness.—*William Penn.*



# A Nutrient Laxative

that gives

## Hope, Health & Happiness

and regularity without aperients.

Defective action of the bowel is frequently slow and cumulative, leading to excessive bacterial activity and the production of microbic poisons that are absorbed into the blood, with consequent headaches, depression and general ill-health. This condition cannot be dealt with by occasional evacuation with purgatives, which do not deal with the cause of the trouble and usually aggravate the underlying disability.

The perfect regulation of the action of the bowel is attained by Virolax—a combination of Virol with Liquid Paraffin, in which the paraffin is so finely subdivided that proper lubrication of the intestines is ensured and regular action is promoted. The nutrient properties of Virolax are so concentrated and digestible that it tones the system without overtaxing the already dilated bowel.

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**Very Palatable. Especially liked by Children.**

In Tins: 1/-, 2/8.

VIROL LTD., 148/166, Old Street, London, E.C.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## PUBLIC HEALTH WORK.

## THE CULTIVATED MIND.

*To the Editor of THE BRITISH JOURNAL OF NURSING.*

MADAM,—The complaint made by Nurses—to which you allude—that as health visitors they are often paid salaries lower than are those health visitors who hold no nursing certificate, is justified on more grounds than one. To name two: (1) Nurses in Public Health contend that full training in hospital or infirmary is the essential basis of qualifications for this form of preventive work. (2) The special qualifications that you enumerate of some health Visitors in a "certain Metropolitan Borough" can be obtained by a woman of reasonable intelligence and power of application in little more than a year, as against the nurses' three year's training. I do not, of course, refer to general education, which everyone will allow should be of a very high standard, as much for the nurse as for the health visitor.

The vexed question of qualifications has in no sense been solved by the "Regulations for the Training of Health Visitors," issued by the Board of Education more than a year ago. Both the Sanitary Inspector, Health Visitor and the Nurse Health Visitor know that work based on such training is doomed to failure. But many people who are interesting themselves in the subject for one reason or another, some worthy, others not so worthy, are firmly convinced that a nurses' training is not desirable for a health visitor. Indeed, it has been stated that a woman with a university degree is far better fitted for the work because she has a cultivated mind!

There are, alas! some nurses who do not yet understand that mere institutional training and experience are by no means all that are needed for Public Health work; it is for such to take to heart your advice. They must realise that "plus other qualifications" is the key that will open the door to higher paid posts.

If the Registered Nurse of the future is trained in general, fever, children's, skin diseases, nursing as well as hygiene, sanitation and midwifery any who show aptitude for such work could, after gaining reasonable experience in nursing, take a Post Graduate Course (which should include law and civics), just as members of the medical profession take the D.P.H. to qualify themselves for the Public Health Service. A Registered Nurse so qualified would command the highest salary, but she must not forget that most important adjunct, "The Cultivated Mind."

Yours faithfully, FLORENCE E. WISE,

*Chairman, Association of Trained Nurses in Public Health Work.*

## POST GRADUATE INSTRUCTION.

*To the Editor of THE BRITISH JOURNAL OF NURSING.*

DEAR MADAM,—I noticed a letter in your issue of the 4th inst., headed "The Case of the Elderly Nurse," saying it is difficult to take a post graduate course for those who have home ties. I should like to say that we have been arranging for members of our Union short periods of instruction in various subjects. Perhaps this information might be useful to some of your readers.

Yours faithfully,

MAUDE MACCALLUM,

*Hon. Secretary.*

*Professional Union of Trained Nurses.  
62, Oxford Street, W. 1.*

## THE "MISAPPREHENSION" GUINEAS.

*To the Editor of THE BRITISH JOURNAL OF NURSING.*

DEAR MADAM,—I enclose further correspondence from the College of Nursing, Ltd., and a nurse's reply, showing the tenacious hold the employers are keeping on the "misapprehension" guineas. If you look at a theatre and the play is not acted as billed, the management at once refunds the money. This College Company, which boasts that it has nurses' interests "at heart," must, by this time, have amassed compound interest.

J. B. M. PATERSON.

*(Copy of Correspondence enclosed.)*

The College of Nursing, Ltd.,

7, Henrietta St., Cavendish Square,

London, W. 1.

*August 19th, 1920.*

DEAR MADAM,—Thank you for your letter received this morning with reference to fee you paid for College Membership and College Registration and the fee to be paid when nurses become State Registered. The agreement to which you refer was as follows:—

"The Council of the College of Nursing has drafted a 'Nurses' Registration Bill,' which provides that the Register already formed by the College of Nursing shall be the first Register under the Act. If, therefore, you are on the College Register, you will automatically and without further fee be placed upon the State Register when the 'Nurses' Registration Bill' is passed."

The Nurses' Registration Bill drafted by the College did not pass and the Nurses' Registration Act, which became law in 1919, was a Government Bill brought forward by the Minister of Health.

The Council of the College has offered to refund the amount, not exceeding one guinea, any College member pays to become a State Registered Nurse, if she became a Member before March 18th, 1920, and thought that her payment of the guinea for College Membership entitled her to become State Registered, irrespective of what Bill became law.

In my letter to you of August 10th I said that we must wait until the Regulations under which Nurses may become State Registered are pub-

lished by the General Nursing Council to receive instructions as to how to proceed in order to have our names put on the State Register.

I am sorry the College cannot apply for the Members, but each individual nurse must communicate with and pay her fee directly to the State Department.

Faithfully yours,

E. SHERRIFF-MACGREGOR,  
Organizing Secretary.

[REPLY FROM NURSE ADDRESSED.]

To the Secretary of the College of Nursing, Ltd.

DEAR MADAM,—Your letter of August 19th received, which stress of work has prevented me answering ere this. I quite understand your inability to register the nurses under the State Act, but I do not understand your inability or unwillingness to refund immediately money received "for goods you are unable to deliver."

Yours truly,

[Though thoroughly characteristic of its attitude to the rank and file of the Nursing Profession, we consider that the Council of the College of Nursing, Ltd., in attempting to evade its printed word on the question in discussion shows astounding moral obliquity.

What the Council printed in leaflet form, as an inducement to ignorant nurses to pay a guinea to the College, stated seven reasons why "Every Certificated Trained Nurse should apply at once for Registration by the College of Nursing."

1. Because the College of Nursing has drafted a "Nurses' Registration Bill," which provides that the Register already formed by the College of Nursing . . . shall be the first Register under the Act." There is no ambiguity about these words "shall be," and "under the Act."

There is no doubt that, through social influence, the College Council believed that it had only to pledge Parliament and its Bill would be law. In its arrogance it over-estimated its own power, also the supposed futility of Parliament. It also ignored the conscientious convictions of the free nurses' organizations and the influence of the women who formed them, and it is greatly to be deplored, now that the College Council has failed to stamp its will upon the *intelligensia*, that it has not the courage to make an honourable apology to the thousands of nurses it has misled—by inducing them to pay eighteen thousand guineas through a pledge it has failed to keep, rather than attempt to further mislead them.—ED.]

#### TRAINED NURSES PROFESSIONAL TRADE UNIONS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Through the London correspondence of to-day's *Herald*, we learn that some of the London boroughs are advocating Trade Unionism for their employees. The writer seems to indicate that this necessitates professional workers joining labour Unions and speaks of the

Council of the College of Nursing Ltd., as having lodged a protest with Dr. Addison on behalf of nurses. As most professional workers already have their own union, this is quite unnecessary. The Medical profession has its trade union, and the "Professional Union of Trained Nurses" formed in London has already made itself known and felt throughout England, and has formed a branch in Scotland which is gaining strength every week.

No one knows this better than the Council of the College of Nursing, Ltd., an association which is frequently referred to by the nursing profession as the "Employers' Combine," and which appears to lose no opportunity of trying to create disorganisation throughout the profession, but whose own disillusioned members form the foundation of a good strong reprisal on behalf of the working nurse.

I am, etc.,

CHRISTIAN H. MCARA.

Hon. Sec. Professional Union of Trained Nurses  
(Glasgow Branch).

#### KERNELS FROM CORRESPONDENCE.

*A Superfluous Daughter.*—"When one looks back at the strain of hospital training in the past throughout this, our Christian England, one wonders what all the mothers of the underpaid drudges were doing never to protest against it."

(Many of us simply loved the laborious days. It was a glorious self-satisfying time. We never complained to our mothers and would have resented their interference.—Ed.)

#### NOTICE.

##### PRIVATE NURSING.

Mrs. Bedford Fenwick will see candidates who wish to join the Registered Nurses' Society for private nursing on Saturdays, September 25th and October 9th, at 431, Oxford Street, London, W., from 2.30 to 4.30 p.m.

Qualification required: A Certificate for three years' training from a voluntary hospital containing not less than 100 beds; preference will be given to nurses who also possess experience in fever, mental, children's, or maternity nursing, or massage. Age, from 25 to 35.

#### OUR PRIZE COMPETITION.

##### QUESTIONS.

*September 25th.*—Describe the technique for taking blood for examination for typhoid bacilli. What are the special points to observe in the subsequent care of the patient?

*October 2nd.*—Describe the mechanism of the ear. For what conditions should the ears be syringed; describe methods of preparation.

*October 9th.*—State what you know about the Care of the New-Born Babe.

*October 16th.*—What is Surface Nursing? How would you care for the skin, hair, mouth, and nails of a helpless patient?

# The Midwife.

## \*POST CERTIFICATE EDUCATION FOR MIDWIVES.

By MISS OLIVE HAYDON.

COLLEAGUES,—Last year I had the pleasure of addressing you on the need of the Midwife for post certificate education. After a year's further experience, I am still of the opinion that it is one of the most urgent needs of our profession. If the midwife is to play a dignified part in the great campaign of preventive medicine she must be better educated, have an up-to-date knowledge of her work, and she must not only be the confidant of her patient—the skilled “accoucheuse,” the careful monthly nurse—but also the teacher of the mother, the educator of the baby, and the co-operator with other social and health workers. Is this a too visionary and exalted ideal for those who have taken up the ancient office of Midwife? I think not—until it is realised there will continue to be a higher rate of maternal mortality and morbidity, a higher rate of infantile mortality and preventable illness than there should be. It is difficult to over-estimate the value of a highly skilled Midwife who takes a comprehensive view of her duties to the expectant mother, the nursing mother and the unborn babe, and the new-born babe.

Contrast for a moment the position of the Midwife at the end of the nineteenth century and in 1920. The Midwife at the end of the nineteenth century was either wholly untrained or had had a short training of three months. As a class, they were looked down upon; many of them were women of little education; their work was ill-paid, in spite of its responsibilities; and it was unappreciated, except by the mothers and a few who knew of steady good work in the homes of the people done by them. In certain areas, it was difficult to get medical help; there was little opportunity for those Midwives who lived in rural areas to keep in touch with modern developments; living in scattered areas, association was difficult; inspection was not always very helpful, regular, or sympathetic; the Midwife herself did not have very exalted ideas of the usefulness of her work; and she plodded on, often isolated, nearly always poor, frequently overworked. But there were those who had the prophetic vision of her possibilities, who realised her needs, who worked for the uplifting of the profession—not least among these was Sir Francis Champneys (President of the C.M.B.), the Council and officers of the Midwives' Institute, and its associations.

In 1920, the training has been lengthened, the syllabus enlarged; the Midwife is definitely recognised as an important worker in the health field (*vide* Ministry of Health, Maternity and Child

Welfare circulars); and it is realised that her help and co-operation are necessary and desirable. The fees of the medical profession called in according to the rules of the C.M.B. are guaranteed by the L.S.A. The Midwives' associations are increasing, both in numbers and vitality. The quality of the Inspectors' work is on the up-grade; and in many areas they are educating the Midwives. The Midwife herself is slowly awakening to the fact that she is an important person; her friends and champions are increasing, her critics are more numerous (I include this in the advances). The pay is still inadequate, although raised; but subsidies and guaranteed salaries are becoming more common. Bona fide Midwives are dying out or being removed from the roll, and the entry of trained nurses and educated women into the profession is a lever that will ultimately do much to raise the status. Midwives are, in many cases, sitting on child welfare committees; there are Midwives on borough councils; and shortly there are to be Midwives nominated to sit on the C.M. Board. Finally, there are grants offered by the Board of Education for post certificate education; and there is a pioneer post certificate school in connection with York Road Hospital, as well as advanced courses and short post certificate courses organized by some of the local supervising authorities or leading lying-in hospitals.

(To be concluded.)

## PUERPERAL SEPSIS.

One of the questions brought forward at the annual meeting of the British Medical Association at Cambridge—Puerperal Sepsis—has aroused interesting expressions of opinion in the *B.M.J.*

Dr. A. Campbell Stark sweeps aside the charge that pathogenic organisms which cause puerperal sepsis are removed by the doctor or nurse from the entrance of the vagina, where they are harmless, to a site farther up—say 2 in. higher—where they become extremely virulent. The fact that a large number of cases of puerperal sepsis occur in patients who have not been touched by doctor or nurse is, in his opinion, sufficient to refute this absurd opinion.

Dr. Campbell Stark writes:

“The truth is that, in these days, puerperal sepsis is in *every case* an autoinfection, and its incidence has no relation whatever to manipulations during labour. The reason why one patient contracts it and another does not is part of the general problem of individual incidence of infection, and of this at present we know little. It is impossible for anyone who has personally attended, say, a thousand labours, to arrive at any other conclusion.”

\* Read at the Nursing and Midwifery Conference, 1920

# THE BRITISH JOURNAL OF NURSING

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## EDITORIAL.

### BURNING QUESTIONS FOR NURSES.

As we have from time to time reported in this Journal, there are various questions of vital importance to the Nursing Profession incorporated in legislation, either now being considered by Parliament, or already embodied in Acts, as well as the Rules for their government under the General Nursing Councils in the three kingdoms.

#### THE UNEMPLOYMENT INSURANCE ACT.

This Act is already on the Statute Book, and, as will be seen in another column, it contains provisions which, unless radically amended, must be most obnoxious to nurses and detrimental to the profession. Unless a strong effort is made now by hospital committees, nurses' organisations, and nurses individually, to have nurses relieved of this unemployment tax, the Nursing Profession in the future will fail to recruit the well-educated type of woman, whom it is so necessary should be attracted to a profession for the prevention and cure of disease.

Nurses already detest the National Insurance Act, into which they have paid many thousands of pounds, and from which they have received little benefit. Now, if under the new Act they are to be required to make further payments—unless they possess an assured income of £26 per annum, or satisfy the Ministry of Labour that they are paid £250 per annum in fees and emoluments, and at the same time are required, when unemployed, to attend daily at Employment Exchanges, and take any posts regarded as suitable which may be offered to them by unprofessional people, many girls will cease to enter the Nursing Profession, and, under such conditions, many parents will not allow their daughters to engage in occupations—nursing or otherwise—in which they could become skilled and self-supporting members of the community.

#### HOURS OF LABOUR BILL.

The Hours of Labour Bill, which has already

been before the House of Commons, and which, in an amended form, is again to be considered, provides for an eight hours' working day.

The Bill should be made to apply only to probationers in training, and nurses working under a middleman. Like the medical profession, nurses, when registered, should be free to sell their skill upon what terms they choose, otherwise there will be no freedom whatever, of service or action, for Registered Nurses, and there is very little doubt that the public will be unable to procure adequate attention in their own homes when sick.

#### RULES FRAMED BY THE GENERAL NURSING COUNCIL FOR ENGLAND AND WALES.

The Rules framed by the General Nursing Council for England and Wales are now being considered by the Ministry of Health. As the Scottish and Irish Councils have drafted Rules which do not commend themselves in several particulars to the Council in England, and political influence is being used in support of their policy, it is time that English nurses who may be affected by these undesirable proposals should be made acquainted with them, so that they may have an opportunity of considering them, and expressing their views concerning them to the Minister of Health, who has jurisdiction in connection with the English Registration Act, but not over the Scottish and the Irish Acts, and thus these proposals may not be sanctioned through lack of knowledge of the opinions and feelings of English nurses.

Members of the Royal British Nurses' Association have approached their Executive, and asked that the Association shall take the initiative in convening a gathering of nurses to confer upon all these matters which so vitally concern them and their work, and, if thought well, to embody their considered opinions in Resolutions to be placed before the responsible authorities. We are informed that such a meeting will be held on Friday, December 3rd, and we hope that nurses who have suggestions to offer on these burning questions will attend and protect their own interests.

## OUR PRIZE COMPETITION.

WHAT CONGENITAL DEFECTS MAY BE PRESENT IN A NEWLY BORN INFANT? WHAT IS THE NURSE'S DUTY WITH REGARD TO THEM?

We have pleasure in awarding the prize this week to Miss D. J. Goddard, Clydesdale, 8, Richmond Terrace, Brighton.

### PRIZE PAPER.

The chief defects met with in newly born infants may be considered under the following headings:—

1. *Defects of Head and Face:* (a) Hydrocephalus, where the head is distended with an abnormal amount of fluid; (b) meningocele and meningo-encephalocele, when there is a swelling in the middle line of the head, between two bones, caused in the first instance by projection of the brain membranes, and in the second, by the brain membranes and substance; (c) tongue-tie, where the tip of the tongue is fastened down tightly by a fold of mucous membrane, and the child cannot suck; (d) hare-lip: Here there is a division in the middle line of the upper lip, sometimes reaching to the nose, or there may be a double deformity; (e) cleft palate, when the roof of the mouth is divided down the middle line; (f) deformity of nose, when the bridge of that organ is sunken.

2. *Defects of the Spinal Column.*—Spina Bifida: Here there is an opening in the vertebral column, through which project the spinal membranes, with or without the spinal cord.

3. *Thoracic Defects.*—Congenital heart defects: (i) the inner lining of the heart is inflamed (endocarditis), the aortic valve between the right ventricle and the aorta being chiefly affected; (ii) there is malformation of the valve-like opening (foramen ovale), the communication between the right and left auricles, and consequently, it does not close properly, and the colour of the baby remains blue.

4. *Abdominal Defects.*—(a) Affecting the stomach: The child may be unable to digest any of its feeds, owing to the absence of the lower (pyloric) opening of its stomach, or it may have difficulty, if the opening is narrowed (pyloric stenosis); (b) Icterus gravis, when the bile ducts are deformed, causing severe jaundice; (c) enlarged spleen or liver; (d) umbilical hernia, when the intestine protrudes through a gap in the muscles in the region of the umbilicus, forming a swelling under the skin; (e) Imperforate or absent anus, in which case the anus has no external opening or is absent,

and imperforate rectum, the rectum being closed at its lower end.

5. *Defects of the Urinary Organs.*—(i) imperforate urethra, the canal along which the urine is expelled from the bladder being closed; (ii) phimosis, a condition in a male baby, where the foreskin is so tight that the orifice is almost obliterated; (iii) ectopia visicæ, when the bladder is deformed and misplaced.

6. *Deformities of the Limbs.*—(a) Talipes or club-foot, where the foot is deformed, certain muscles and tendons being contracted; (b) deformity or absence of fingers and toes; (c) congenital dislocation of joints, especially hip joints.

7. *General Defects.*—Congenital syphilis is the most important, but its signs rarely appear till a few weeks after birth.

When a baby is born with any defect whatsoever, the nurse's duty is threefold:—

(a) To send immediately for medical help.

(b) If a midwife, to notify the Local Supervising Authority.

(c) Pending the doctor's arrival, to do her best to improve the child's condition.

1. (a), (b) In dealing with head defects, all pressure must be avoided; (c) if the tongue-tie is bad, the baby must be spoon-fed till cured; (d) in severe cases of hare-lip and cleft palate, spoon or tubal feeding will have to be resorted to, and carefully carried out.

2. For a spina bifida, the swelling must be protected from pressure, and the child kept particularly warm.

3. Little can be done for congenital heart defects, but warmth may be applied and drops of brandy given with discretion.

4. (a) When pyloric stenosis is present, small frequent feeds must be given, and if necessary rectal salines; (b) an umbilical hernia may be kept in place by a pad of wool enclosing a cardboard disc, placed underneath a firm abdominal binder.

5. (ii) To relieve temporarily the condition of phimosis, the foreskin must be drawn back and carefully cleansed at regular intervals.

7. The general condition of the child must be improved by careful attention to feeding and warmth, and the nurse must use every antiseptic precaution, as regards mother and child, to prevent the spread of infection. Other deformities can only be met by operation.

### HONOURABLE MENTION.

The following competitors receive honourable mention: Miss B. Brown, Mrs. J. M. Jepson, Mrs. Farthing, Miss P. Thomson, Miss M. James, Miss Marian Gillam.



## NURSING ECHOES.

On Saturday, 20th inst., at 10, Orchard Street, W., the Public Health Nurses belonging to the R.B.N.A. had the great pleasure of meeting the Lady Hermione Blackwood and Mrs. Breckinridge, Director of Infant Welfare Work in connection with the American Committee for the devastated regions of France. Mrs. Breckinridge gave an exceedingly interesting account of her work, and everyone appeared thoroughly to enjoy the discussion which followed. The report of the meeting will appear in the Supplement of the R.B.N.A. at an early date.

The National Union of Trained Nurses is holding a three days' Café Chantant and Sale of Work on Thursday, Friday and Saturday in this week from 2 till 8 p.m., at 46, Marsham Street, S.W. It is being opened on Thursday, the 25th inst., at 3 p.m., by Mrs. Ogilvie-Gordon, D.Sc., J.P., a staunch friend of the Union.

Besides the Café Chantant, for which very good vocalists, &c., are giving their services on all three days, there will be a concert on Thursday evening, at 7 p.m., in St. John's Hall, close to the office. It is hoped that all members and friends of the Union will come and support the fête. They will find useful Christmas presents to buy, and music, competitions, &c., to entertain them.

A fortnight later, on Thursday, December 9th, at 8 p.m., there will be a concert by well-known professional artistes, in the Central (Small) Hall, Westminster. Tickets are 3s. 6d. and 5s. 9d., and are now on sale at the Hall, and at 46, Marsham Street, Westminster.

The Imperial Nurses' Club, 137, Ebury Street, S.W. 1, will keep its "Birthday Week" from November 29th onwards. On Monday, 29th, the Vice-Presidents will be "At Home" from 4 to 5 p.m. At 5 o'clock the Countess of Selborne will open the new Lounge, and will be supported by the Archdeacon of London. On each of the following days of that week the Club will keep open house, and professional and amateur friends have arranged first-class performances. It was originally intended to sell visitors' tickets at 2s. each, but, as there are complications connected with this, all will be guests of the Club, and can give any contribution they wish.

An important members' meeting will be held at 3.30 on Wednesday, December 1st, at which the Secretary will present the report for the year, and the Chairman will read the Club's

constitution. This contains a clause enacting that the members of the Club shall elect three of their number to serve on the Committee of Management.

The opening of the new Home of the Paddington and Marylebone District Nursing Association at 117, Sutherland Avenue, Maida Vale, on November 18th, was an extremely pleasant function. The guests were received by the Chairman of the Committee, Mr. W. F. Richmond, and Mrs. Debenham, and numbered some 150, including the Mayor of Paddington and Miss Peterkin (General Superintendent), Miss Bridges, and Miss Lowe from the Headquarters of the Q.V.J.I., and Miss Marsters, the Superintendent, and her staff were indefatigable in looking after the welfare of the guests.

The Home, of which the Committee have purchased the fifty-six years' lease, is delightfully situated, with access to a public garden. The rooms are large and lofty, with abundance of light. In the dining-room an anthracite stove has been installed and the nursing staff, when they come down to breakfast at 7.30, find the room thoroughly warm. The big dining table is stained and polished, and table cloths are abolished. Instead, there is an asbestos mat, enclosed in a dainty white linen pocket, in each nurse's place.

The sitting room is a charming room, furnished with plenty of comfortable chairs; the covers are of a restful shade of blue, with brown cushions, and the effect is most harmonious.

In each bathroom is a sink, large enough to permit hot water cans to be filled from the tap above it, and small enough to serve admirably as a basin for hand-washing in the daytime.

It is proposed that one large room shall be so furnished that it can be let for meetings at a small charge, and so add to the income of the Association.

The Association now charges a fee of 1s. per visit to those patients who can afford to pay, and also undertakes daily visiting amongst those who cannot afford the services of a whole time nurse at a charge of 3s. an hour. Indigent cases are attended free.

On Friday, December 17th, a Dance in aid of the Association will be held by kind permission of Brigadier-General E. P. Serocold, at 24, Sussex Square, W.8. Tickets, including supper, 22s. 6d. if bought before December 10th, or 25s. afterwards.

The majority of hospitals are hurrying their rules for the admission of patients, by payment.

and now that wages are so high, and service so costly, that patients shall pay according to their means is only right. But we were somewhat surprised to note that at the special Court of Governors of the Middlesex Hospital, which unanimously resolved to inaugurate the policy of contributions by patients, Mr. Webb Johnson suggested that the policy of taking contributions from patients should be extended; that all the nurses should reside outside, either in hostels or in their own homes; and that their rooms should be devoted to the reception of wealthy patients, who were at present practically debarred from accepting the benefits of the hospital, however largely they might have subscribed to it, the understanding being, of course, that the wealthy patients would pay fully for their treatment, and so augment the revenue of the hospital.

The Earl of Athlone, the Chairman of the Board, in subsequent conversation with an *Evening Standard* representative, said:—"Mr. Webb Johnson's proposal is a very interesting one."

We wonder what the subscribers who specially contributed a large sum of money to build the comfortable new Home for Nurses at the Middlesex will think of the proposal to eject them for the reception of wealthy patients? Moreover, we wonder what the nurses will do under such circumstances? We note constant advertisements in the press for probationers for this hospital. We should imagine that if Mr. Webb Johnson's proposal materialises, the shortage of probationers and nurses will be considerably accentuated.

We hope the Royal Chairman will consult the Nursing Staff before he permits this "interesting" suggestion to injure the Nursing School attached to the Middlesex Hospital.

Owing to lack of funds, the committee of the Birmingham District Nursing Society recently decided to close the Nurses' Home at No. 94, Moseley Road.

So many communications have been received from doctors, clergymen and others, pointing out the effect this action would probably have upon the health of the city, that the committee has decided to keep the home open till the end of the year, in the hope that increased subscriptions may then enable the full staff to be maintained.

A committee has been formed by the doctors and clergy for the purpose of permanently increasing the subscription list, and on that body

it is hoped that every district in the city will be represented.

Wealthy Birmingham should make a bumper response.

The eagerly expected volume, "A Short History of Nursing from the Earliest Times to the Present Day," by Miss Lavinia L. Dock, R.N., Secretary of the International Council of Nurses, in collaboration with Miss Isabel Maitland Stewart, A.M., R.N., Assistant Professor, Department of Nursing and Health, Teachers College, Columbia University, New York, has just been published by Messrs. G. P. Putnam's Sons, 24, Bedford Street, Strand, W.C., price 17s. 6d. The volume has been prepared especially for the use of student nurses. It is in effect a condensation of the larger History of Nursing prepared by Miss Dock and Miss Nutting, but some recent developments are dealt with only in this volume. It is written with all the brilliancy which we expect from the authors. We hope to review it at length in an early issue.

## ROYAL BRITISH NURSES' ASSOCIATION.

### A CONFERENCE ON BURNING QUESTIONS.

At the request of Members of the Corporation, the Executive Committee of the Royal British Nurses' Association have decided to hold a Conference at 11, Chandos Street, Cavendish Square, W.1, on Friday, 3rd December, at 3 p.m. The subjects under discussion will be (1) The Unemployment Insurance Act; (2) the Hours of Employment Bill; and (3) the proposals of the Scotch and Irish Nursing Councils concerning the Rules for the State Registration of Nurses. It will be remembered that, among the suggestions of these Councils, are the following:—(a) The establishment of a Supplementary Register for Cottage Nurses; (b) Automatic Registration of Scottish and Irish Nurses on the English Register, irrespective of whether they do, or do not, hold the qualifications required of English Nurses by the English Council, and (c) that Scottish and Irish Nurses shall be Registered on the English Register for a fee of two shillings and sixpence, which carries with it the right to vote for the election of the Nurse Members on the Council, while English Nurses are required to pay a guinea for this great professional privilege.

We beg all our readers to use every effort to make the Conference widely known among Nurses. Everyone is cordially invited to be

present. It has had to be called at very short notice, but the matters to be discussed are of vital and urgent importance to all members of the profession, and the Executive Committee of the Corporation, by convening the Conference, is giving them the opportunity of discussing these burning questions and conveying their considered conclusions to the Government Authorities responsible for just legislation.

## THE NIGHTINGALE MEDALS FOR 1919.

The presentation of the Nightingale Medals, given annually to the three nurses of the Nightingale Training School at St. Thomas' Hospital, S.E. who have earned them by their proficiency both in examinations, and for ward efficiency and conduct, is always the occasion of a pleasurable gathering.

This year the ceremony took place in the Nightingale Home on November 17th, in the presence of a large gathering of Sisters and Nurses, "Old Nightingales" and other friends. Both before and after the presentation function tea and other good things were hospitably dispensed by the Matron (Miss A. Lloyd Still, C.B.E., R.R.C.) and the Nursing staff.

Mr. Minet, Treasurer of the Nightingale Fund, said that they met annually in this family gathering for two reasons, to present the medals and to do honour to the memory of the lady who smiled down upon them from the picture behind him—Miss Florence Nightingale.

On these occasions it was usual for him to address them on some topic relating to nursing. The one he had selected this year was a difficult one, and he had therefore written his address, on Trade Unionism for Nurses (which we hope to publish next week) which he proceeded to read.

Mr. Minet then called on Lady Makins, R.R.C., an old Nightingale, to present the medals awarded for 1919. (The Gold Medallist must obtain 75 per cent. of the total marks, 60 per cent. in all examinations and 70 per cent. for Ward efficiency and conduct. The Silver Medallist 65 per cent. of the total marks, 50 per cent. in all examinations and 70 per cent. for Ward efficiency and conduct.) The following were the awards:—

*Gold Medal.*—Christine Tompkinson.

*Silver Medal.*—Maria Marjorie Fisher.

*Bronze Medal.*—Dorothy May Cockell.

These announcements were greeted with loud applause, which was renewed as the recipients went up to receive their medals from Lady Makins, who spoke of the great pleasure it was to her to make the presentations and to say how much she owed to St. Thomas's. She described Mrs. Wardroper, the first Matron of the hospital under the new régime, dignified, neat, and wearing a black silk bonnet, and the Home Sister, Miss Crosland. The training and discipline were hard, but they helped to strengthen their characters. Many improvements had been made since her day,

for not a few of which they were indebted to their present Matron. (Loud applause.)

It would have been a great satisfaction to Miss Nightingale to know of the work of her Sisters and Nurses during the great war. More than one memorial had been raised to her and they were there that day to celebrate a very charming one, but the greatest and most practical of all was the School of Nursing on which her heart was set.

Mr. Minet proposed a hearty vote of thanks to Lady Makins, and announced a telegram from Mr. Bonham Carter, regretting that he was unable to be present, and congratulating the medallists.

The proceedings concluded with three hearty cheers for the Matron, and the singing of the National Anthem.

Subsequently the Treasurer, Sir Arthur Stanley, and the Secretary, Mr. G. Q. Roberts arrived and added their congratulations to those received by the medallists.

## ABJECT APOLOGY FOR A CRUEL LIBEL.

**MacCALLUM v. BURDETT, THE SCIENTIFIC PRESS, LTD., AND OTHERS.**

This case was heard on Tuesday, November 23rd, in the King's Bench Division of the High Court of Justice, before the Lord Chief Justice, and a special jury.

As our readers are aware, Miss Emmeline Maude MacCallum, a well-known trained nurse, sued Sir Henry Burdett (since deceased), the Scientific Press, Ltd., and Messrs. Spottiswoode, Ballantyne & Co., Ltd., the editor, publishers, and printers of *The Nursing Mirror* and *The Hospital* for damages for libel.

At the outset of the case, Mr. BARRINGTON WARD, K.C., Counsel for the defendants, said it was unfortunate the principal defendant, Sir Henry Burdett, had died in April last. He withdrew unreservedly the pleas of justification and fair comment on behalf of his clients.

MR. PATRICK HASTINGS, K.C. (instructed by Messrs. Theodore Goddard & Co.) in opening the case, commented strongly on the utter cruelty of the defendants in maintaining the plea of justification for twelve months. He understood the defence to mean that they could have justified the words until the death of Sir Henry Burdett. He had carefully studied the words of which Miss MacCallum complained, and nothing could justify them. The defendants could not. Yet only three minutes ago they were maintaining the attitude in which they had gone far to ruin this lady's career. The libels had suggested that the plaintiff was a thoroughly worthless person, and he had come there to fight on the assumption that the defendants were prepared to submit not only that they had said these words, but that they were true. Miss MacCallum had had to live for twelve months under that stigma, which had resulted in her losing most of her friends, as well as her means of earning a livelihood.

MR. BARRINGTON WARD said that at the proper time he would tender to the lady, on behalf of his

clients, an unqualified apology that any imputation should have been made upon her.

MR. PATRICK HASTINGS said that all her working life Miss MacCallum had been a professional nurse. These two papers, *The Hospital* and *The Nursing Mirror*, of which Sir Henry Burdett was the editor, circulated almost entirely among nurses. The same course was pursued by both. They published a most serious libel, the effect of which was to characterise Miss MacCallum as an untruthful, unscrupulous, and dishonest person, determined to ruin a body of nurses of which for twenty years she had been a most devoted member, the result being that her friends dropped away from her.

The case centred round two organisations, one the Union of Nurses, which Miss MacCallum was anxious to form, the other the Nurses Co-operation, of which she was a member of the staff. Under the rules of the Co-operation, if the Society were wound up the nurses could not benefit by the surplus funds, but they were to go to some other body. Briefly, the libel complained of was, as Mr. Patrick Hastings explained, the defendants considered that if they could suggest that Miss MacCallum was a fraud, and that she was trying to ruin the Nurses' Co-operation in order to get hold of its reserve funds (some £25,000) to finance the Union of Nurses, sympathy would be alienated from her, and they would smash the Union. If all the Burdetts in the world were alive, he would throw down the challenge that there was not a tittle of ground, except in their malignant imagination, for such an accusation.

Counsel also showed that the result of Miss MacCallum's efforts to form a Nurses' Union was that she, and two of the friends who supported her, were dismissed from the Co-operation, a letter being received by her from the Secretary, dated February 18th, 1920, informing her that in the event of her resignation not being received by that date, her name would be removed from the Register of the Nurses' Co-operation.

THE LORD CHIEF JUSTICE asked who wrote the letter, and Counsel replied, "The Secretary of the Co-operation." His lordship said he would like a copy, and this was accordingly handed to him.

Mr. Patrick Hastings read extracts from the articles complained of, and said that the advertisements appeared to be the more valuable part of the papers. If the articles were a type of the sort of stuff that was published, the literary matter could not be of much value to anyone. He also read an anonymous letter, signed "A Loyal Sister," published in *The Nursing Mirror*. He remarked that he would like to know whether the same person wrote every one of those articles, including the letter signed "A Loyal Sister." "It does happen, you know, that letters are written in the office."

Concluding, Mr. Patrick Hastings said there was not a word of truth in the allegations which had been made, and invited the jury to cast their minds back and think whether in all their lives they had heard of such a case as this. The defendants had had ample time in which to justify their pleas, and they said they were true; then, at the last moment, when they knew they were coming

into court to be cross-examined, they withdrew them. He invited the jury to award substantial damages, because the greater the damages given the clearer his client would leave the court. Though her object was not to obtain damages, yet, if she were only awarded a small sum, the public might think that though she had won her case she had not made a favourable impression upon the jury.

MISS MACCALLUM then went into the witness box and bore out her Counsel's statements. She said that it never entered her head that the accumulated funds of the Nurses' Co-operation should be used for the Trade Union, but it was within her knowledge that some of her older colleagues on the Nurses' Co-operation were ill and almost starving, and she was anxious that pensions and annuities should be started out of the surplus funds. The remuneration of nurses generally at that time was very poor. Quite a usual salary for a hospital sister was £30-£40 a year—and in nursing homes nurses were often paid a similar sum while the patients paid £3 3s. and £4 4s. for their services.

THE LORD CHIEF JUSTICE said: "Some of us have discovered for ourselves that the fees which we pay, and *gladly* pay, for our nurses, do not always go to the nurses, but to other persons. The plaintiff struck a most sympathetic note when she wanted to alter that."

MR. BARRINGTON WARD, at the commencement of his cross-examination, formally tendered to Miss MacCallum, on behalf of the defendants, an expression of unqualified regret for making any imputation against her.

Shortly afterwards, on the intervention of the Judge, counsel and their clients conferred, with the result that the defendants expressed their willingness to pay Miss MacCallum the sum of £500 and indemnify her for her costs.

MR. PATRICK HASTINGS, on behalf of Miss MacCallum, accepted the offer, saying that her object was not primarily damages, but to advance the interests of nurses, and to defend her personal and professional reputation. That had been achieved. Every imputation had been withdrawn, and her friends might know that she was worthy of their friendship, and more—of their admiration.

THE LORD CHIEF JUSTICE said he was glad that the parties had come to terms. He thought they had come to a right settlement. It was proper that the plaintiff should have substantial damages. A juror was then withdrawn.

We heartily congratulate Miss MacCallum on the result of her fight for right, justice, freedom of speech and freedom of co-operation amongst the members of her profession.

#### PROFESSIONAL UNION OF TRAINED NURSES.

The monthly meeting of the Public Health Section of the Professional Union of Trained Nurses will be held at 17, Evelyn House, 62, Oxford Street, W.1, on Friday, November 26th, at 6 p.m.

## THE COLLEGE OF NURSING, LTD.

An Extraordinary General Meeting of the above-named Company, at which the Hon. Sir Arthur Stanley presided, was held at the Royal Society of Medicine, No. 1, Wimpole Street, W., on the 20th of November, when the Resolutions passed at the Extraordinary General Meeting of the Company on November 4th, and printed in our issue of November 13th, page 271, were submitted for confirmation as Special Resolutions, and carried, the first being moved by Miss Biggar, seconded by Miss Pocock, and the second by Miss Crawford, seconded by Miss Bowdler.

The Chairman announced that the subscription for new members after November 20th would be 5s. per annum, in addition to the entrance fee of one guinea. The existing members would be asked to pay a voluntary contribution of 5s. annually, and forms would be sent to them on which they would be asked to state what they were prepared to do.

The *Bulletin* would be distributed quarterly to members free of charge. It was hoped to make it self-supporting from advertisements, but they had not arrived at that position at present. That was the whole of the formal business.

The Chairman then moved, and Miss Turnbull, R.R.C. (Edinburgh), seconded, a vote of thanks to the Royal Society of Medicine for the use of the room.

Replying to questions, the Chairman said the 5s. subscription would be applied to the business part of the College. It was quite distinct from the Club subscription, which presumably would be larger for London than for country members.

Miss Cox Davies said it was up to the London members to have such a club as they chose to pay for. They must not expect the College or anyone else to support it.

### UNEMPLOYMENT INSURANCE ACT.

The Chairman here announced the arrival of Miss Ford and Mr. Munro, of the Ministry of Labour, who had come to give those present what help they could to enable them to understand the Unemployment Insurance Act.

Miss Ford prefaced her remarks by saying that as they were not able to submit their answers to the Head of their Department, they must not be understood as having official sanction. The Unemployment Insurance Act came into force on November 8th, and was compulsory. It was intended to include all engaged under a contract of service or apprenticeship. All those engaged in manual labour (with certain important exceptions) were included, whatever the rate of their remuneration, and those engaged in non-manual labour, whose remuneration or its equivalent was less than £250 per annum. The chief exceptions were those engaged in domestic service, and agricultural labourers. The scheme applied substantially to all employed persons for whom contributions were payable under the National Health Insurance Acts. It was possible to claim exemption if a person

could prove that he possessed an income or pension of £26 a year, or was mainly dependent on others. Then the employer had to pay, but not the employed person. The contributions were paid to a Central Fund. In the case of women the contribution was 3½d. per week for the employer, 3d. for the employed person, and 1½d. was paid by the State. If out of employment, provided she fulfilled the conditions, a woman could claim 12s. a week, but could not draw this pay on the first three days of unemployment, or for more than 15 weeks in any one year.

A person who had made 500 contributions could, at the age of 60, have these refunded, plus 2½ per cent., less what he had received in benefits.

As regards nurses, their position was clear. Contributions were payable by all who paid into the National Insurance Fund. A question had been submitted to the Minister as to whether nurses could be regarded as in domestic service, and he had the question at present under consideration. The general rule was that a person came under the Act if employed under a contract of service unless he received over £250 a year.

Another possibility of exception for nurses was where their employment was under a local or other public authority and the Minister was satisfied that they would not be dismissed except for misconduct, or neglect of, or unfitness to perform, their duties.

The Chairman inquired about the position of nurses in hospitals, and Miss Ford said that their average rate of pay brought them under the Act.

In reply to a question, Mr. Munro said that in the normal way, if a nurse went to claim unemployment benefit, she might be asked if she could get a job. Supposing they could tell her of one up at Newcastle, she would not be required to take one far away immediately, but would be allowed to exhaust the possibilities of the locality first; but if after a little time there seemed not much chance of her finding one, if she wanted to benefit she might be required to go further afield.

Miss Cox Davies elicited that unemployed persons must register at an unemployment exchange, that such registration was absolutely compulsory, that you would not in private life pay out without proof, and unemployed persons would have to present themselves where they had registered each day.

Sir Arthur Stanley said there was no possibility of unemployment for hospital nurses, and the British Hospitals Association had approached the Minister in regard to exemption.

Mr. Munro said further that persons in receipt of a salary were not unemployed.

The Chairman then inquired about private nurses, and Miss Ford said that she believed the Health Insurance Commissioners were of opinion that if a nurse earned at the rate of 3½ guineas a week, that, with her emoluments, would make her income over £250 per annum.

A nurse present stated that she had always stamped her National Insurance card herself, and Mr. Munro said that was the first duty of her

employer. Whereupon he was asked—if her employer was sick and in bed, what then?

It was also elicited that during any week when there was no employment the card was not stamped and there were no arrears. If a nurse had several employers in a week the card must be stamped by the first. No answer could be given as to whether a contribution would be payable when an Association paid a nurse a retaining fee.

In reply to a question from the Chairman as to the value of board, lodging, and washing, Mr. Munro said that in one case board and lodging had been assessed at £1 1s. a week, at which laughter tinkled round the room.

It was agreed to ask the Minister whether, if a nurse earned three guineas a week and emoluments, she would be exempt, and for this purpose to find someone who fulfilled the conditions to put up a test case.

Other questions were asked relating to scrubbers in voluntary hospitals, as to the position of servants in nursing homes, as the Act only exempts servants in private service, but if those in nursing homes were required to pay then the homes would get no servants.

Mr. Munro stated that a person offered a suitable job by an employment exchange would have to take it, but an appeal might be made to an umpire. There was a penalty in the Act for non-insurance.

Miss Ford said that any questions sent in to the Ministry on forms which could be obtained from a Labour Exchange would be answered in due course.

### IRISH NURSES' UNION.

A meeting of members of the Irish Nurses' Union was recently held in the Molesworth Hall, Dublin, to consider the question of having a forty-eight hours' week made applicable to the nursing profession. Miss Bennett, President of the Union, presided, and, having referred to its progress and its objects, dealt with the conditions under which nurses worked, and advocated their linking up with trades unionism, because trade unions proposed to take a greater interest in hospitals than ever before, and the levy which it was proposed to put on members of these unions towards the support of their hospitals would bring in something like £60,000 a year to the Dublin hospitals. They would thus realise the influence which trades unionism would exercise on the nursing profession. The President was supported in favour of a forty-eight hours' week by Miss Wickham, Dr. Hennessy, and others, and a resolution was passed expressing the opinion that nurses and probationers should not be excluded from the Government's Hours of Employment Bill (No. 2) and strongly protesting against any proposal to legalise a longer week for nurses than for the general body of workers.

Mr. John Frederick Stancombe, of Shaw House, Melksham, Wilts., who died on July 24th, bequeathed £1,000 to his nurse, Miss E. A. Tomlinson.

### WELLHOUSE HOSPITAL.

The long anticipated hospital—the Wellhouse Hospital, High Barnet—belonging to the Barnet Guardians was opened on Tuesday, November 16th, by Lord Hampden, Lord Lieutenant of Hertfordshire.

The fine block of buildings was begun in the early part of 1915, but owing to the stoppage of building due to the war the work so far as the Guardians were concerned, came to a standstill. But in 1916, it was completed by the Army Council and opened as a war hospital.

Between the years 1916-18, some five and six thousand wounded and sick soldiers received treatment there.

It was handed back to the Guardians in October, 1919, and they purchased from the War Council the complete equipment at a price 10 per cent. less than it cost in 1915.

The building consists of a main block containing six wards on three floors with accommodation for 204 beds.

The thoroughly up-to-date administrative block is designed with a view to supplying the completed building of 600 beds.

The maternity ward and a labour ward contain nine beds, the theatre and dispensary are on the most modern lines. The magnificent kitchen is worked by steam, and provided with hot plates and every device that will ensure the comfort of the patients.

On the south side of the hospital there are pleasant verandahs leading out from the wards, which command a view that is unsurpassed in the county.

Within, the wards have been distempered in a soft restful shade of green. There are delightful day-rooms attached, and thanks to the Army Council, they are exceptionally well provided with comfortable easy chairs.

The opening day was a great success, and St. Martin's summer supplied a perfect autumn day.

The opening ceremony took place in an empty ward on the top floor.

It commenced with dedicatory prayers offered by the Rev. H. S. Miles, Chairman of the Board. The hymn "O God Our Help in Ages Past," was accompanied by band which had been engaged for the occasion.

Alderman Park, Chairman of the Barnet Justices, in an interesting speech, pointed out to the visitors that the hospital stood upon historic ground. Centuries ago they had a source of healing in that particular neighbourhood in the form of a physic well.

Samuel Pepys used to partake of its waters. After the usual vote of thanks the invited guests enjoyed the tea hospitably provided by the guardians, medical officer, and some friends. This was delightfully arranged and served by the combined staff of the Institution and hospital, and there was no lack of good things.

The visitors were then invited to inspect the hospital, which at the same moment was thrown open to the ratepayers.



The patients had only been transferred from the old building two days before, and some of them were feeling rather homesick for the old surroundings which they had known for so long, some for many years; but extra fare and the cheerful strains of the band, stationed outside the building, made for consolation to them. The Guardians have been fortunate in securing the services of Miss Winifred A. Todd, formerly Matron of the Rotunda Hospital, Dublin, who holds the Certificate of Guy's Hospital.

She has been in residence for some weeks past, and has been extremely busy getting order out of the chaos, which was inevitable after the evacuation of the military, and the subsequent re-decoration.

She and her assistant matron, Miss Jenkins, are much to be congratulated on the result of their strenuous work.

It is proposed to receive paying patients into the spare beds of the hospital. This is of course, quite an innovation for a Poor Law Hospital, but as it is now proposed that it shall become a Training School for Nurses, the plan should be of great benefit from that point of view.

For the first time the Guardians have engaged the services of a resident medical officer, who will work under the non-resident Medical Superintendent, Dr. B. H. Stewart.

Want of space prevents a more detailed account.

The Wellhouse Hospital has been opened under very pleasant auspices, and we trust and believe that it will be a blessing to the sick of both the old and new poor.

## THE HOSPITAL WORLD.

The "Swan Song" of the Alexandra Hospital for Children with Hip Disease (or more accurately for all cases of Surgical Tuberculosis), Queen Square, Bloomsbury, W.C.1, on Wednesday, November 17th, was a very pleasant function. For, after all, the hospital, which has been sold, is only removing into the country, not closing down, and pending the provision of a new hospital the Alexandra will enjoy the hospitality of the Governors of St. Bartholomew's Hospital, who have lent its Committee the beautiful Kettlewell Convalescent Home, at Swanley, Kent. So adieux were said to the sound of cheerful music and the tinkle of the cups, and many of the little patients expressed their pleasure at the prospect of a move to the country, and the parents also are quite content, as they are sufficiently educated to realise the benefit of the fresh country air for their children.

The following day the packing up for this big family began (no mean undertaking, when it is realised that 52 children, mostly flat on their backs, 20 pantehnicons of furniture and 30 nurses had to be moved to Swanley).

In the front hall and office, the Matron Miss Fitch, who is intent on raising the sum of £1,000, was welcoming friends of the hospital and former members of the nursing staff, and incidentally

doing good business in old furniture in aid of her fund. A card on Queen Square, on which were lines by one of the Nursing Staff, was also selling well at sixpence. It began—

"Morning sunshine, spring in the air,  
Pigeons cooing—a London square."

Buy the card and you will know the rest

The Duke of York presided at a dinner held at the Connaught Rooms last week in support of an effort to raise £25,000 to meet the immediate needs of the Queen's Hospital for Children, Bethnal Green.

The total sum realized by the dinner was £20,300, of which £3,500 were contributed by the Children's Jewel Fund and £891 by the Working Men's Societies. The Duke of York gave £25.

Something like £30,000 a year is required. Working men and trade unionists are organizing to raise funds. Happy parents of strong and healthy little ones should spare a gift for hospitals for innocent suffering children.

A meeting of members of both Houses of Parliament have discussed the future management of voluntary hospitals, and in a resolution urged that an immediate inquiry should be made on the subject of State or rate aid before any legislation is passed. The resolution was to be reported to the Prime Minister and the Minister of Health.

Bethnal Green Poor Law Infirmary is to be called the Bethnal Green Hospital.

## APPOINTMENTS.

### MATRON.

**Barrowmore, East Lancashire Tuberculosis Colony, Chester.**—Miss F. Helena Yoxall has been appointed Matron. She was trained at the North Staffordshire Infirmary, Stoke-on-Trent, and has since been Matron of the Paddock Auxiliary Hospital, Oswaldtwistle, and the Convalescent Home, Porthcawl, Glamorgan.

### SISTER MIDWIFE.

**Queen Charlotte's Lying-in Hospital, Marylebone Road, N.W.**—Miss Catharine A. Arkcoll has been appointed Sister Midwife. She took her general training at the Miller General Hospital, and has been Staff Nurse at Queen Charlotte's Hospital, and now holds the post of Sister of the Preliminary Training School.

### SISTER.

**Queen Charlotte's Lying-in Hospital, Marylebone Road, N.W.**—Miss Lucy B. Flemons has been appointed Sister of one of the Lying-in Wards. She was trained at the Southwark Infirmary, and was Staff Nurse at the Samaritan Free Hospital and Staff Nurse at Queen Charlotte's Hospital.

## COMING EVENTS.

**November 25th, 26th, and 27th.**—National Union of Trained Nurses. Café Chantant and Sale of Work, 46, Marsham Street, S.W. 2 to 8 p.m.

**November 29th—December 5th.**—"Birthday Week." Imperial Nurses' Club, 137, Ebury Street, S.W.1.

**December 3rd.**—Royal British Nurses Association. A Conference on Burning Questions. 11, Chandos Street, Cavendish Square, W.1. 3 p.m.

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

## VOX POPULI.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Now that the proceedings of the General Nursing Council are open to the Press, presumably we nurses who are affected by the Rules should have a right to consider them, so that we may express our opinion on them before they are finally agreed. I carefully read the report of the last meeting of the Council, and hope others who have done the same will give warm support to the decisions of the Registration Committee, of which you are Chairman, on the following points:—

1. That our English Council shall have adequate authority to deal with every application for Registration on our Register. Surely those who have been placed by Parliament in the responsible position of compiling the State Register of Nurses cannot exercise such responsibility, if they are to be compelled to register any man or woman selected by other bodies whose standards may not be equivalent to those upon which our Council have agreed for the admission of English Nurses. For instance, how about a Cottage Nurses' Register? Or placing Fever Nurses on the General Register as proposed by the Scottish Board of Health? Is our Council to be compelled to place such nurses *automatically* on our General Register, although we strongly object to such arrangements, and probably should refuse to register if any such Rules were in force for English and Welsh nurses?

I note with satisfaction that our Council voted unanimously for equivalent standards in any system set up for registration between the three Councils, and feel sure our colleagues in Scotland and Ireland will see the justice of this. But how about the nurses' representatives on the Scottish and Irish Councils? Have they taken a firm stand on this important principle?

Then as to finance? There again you will have every just-minded nurse with you. As you infer, the cost of Registration is not merely comprised in stamping a few reference letters, and printing a name in a Register. The upkeep of the whole work of the Council—a very costly business—must be included in paying for Registration. To propose that this can be done for 2s. 6d. a head is ridiculous, and why should we English nurses pay a guinea (little as it is) to maintain our Register if Scottish and Irish nurses may share equal privileges with us for *one-eighth of the cost*? You hit the nail on the head in emphasising the value of professional enfranchisement. Why should I

pay a guinea for the right to vote for the elected nurses on the General Nursing Council for England and Wales, and Scottish and Irish nurses enjoy this important privilege for 2s. 6d.? The Council is *our* governing body, and I object to be governed by persons who may be elected on this cheap and irresponsible vote, and by those, if automatic registration was in force, for whose characters and qualifications our governing body was not responsible. The whole proposal is wrong in principle, and we English nurses must support our Council in its desire to make just Rules for us and all nurses, and to maintain a dignified position with discretionary powers for our Council.

We cannot do better than follow the precedent of the Central Midwives Board. Every midwife registered under the Scottish and Irish Midwives Acts applying to be registered in England must prove the standard equivalent, and pay the same fee of one guinea, as the Board demands from English midwives. Any other system is unjust and must lead to resentment, and why should English nurses submit to it? It would be wrong for us to do so. Now is the time therefore to express our opinion to the Minister of Health and our General Nursing Council. We must begin right if we mean State Registration to succeed.

Yours very truly,

HENRIETTA HAWKINS.

## EFFICIENT NURSES FOR ALL CLASSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—You report in the JOURNAL that at the meeting of the General Nursing Council on November 3rd the question of a separate Register for Cottage Nurses was brought up. Many trained nurses would like to know what is a Cottage Nurse? Well, as far as I can make out it is only our old friend the "handy woman" a little glorified, and backed up by monied people.

Nobody will deny, I think, that the handy woman served her day and generation well, and many a good type of woman helped both doctor and nurse. But to foist her—even in a separate section—upon the State Register, for which trained nurses worked for a generation, and also paid for, is misleading. Surely nobody can think that this Registration business emanates from the Cottage Nurses themselves; it is most likely run by the Lord of the Manor and Lady Bountiful to bolster up the old idea that a less competent nurse is good enough for the poor. Now the poor, we know, have to put up with many things of inferior quality, but when it comes to sickness, they must have the best nursing.

What is wanted is well-trained, efficient nurses for all classes. Nothing else will satisfy the forward movement amongst nurses themselves.

Yours faithfully,

E. HORTON.

The Scottish Nurses' Club,  
205, Bath Street, Glasgow.

### EXPRESS YOUR CONVICTIONS BY THE FIRST POST.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Of what avail the Thirty Years' War, or the victory of December, 1919, if the very objects for which we fought go by the board? If the Scottish Council places nurses with only special training, Cottage Nurses, and such like, on the General Register, where does the stability of the trained nurses' position or the safeguarding of the community, come in?

We are all ready to admit that there are many people who, by their manipulative skill or the power of their personality, are of great help to their fellows in time of sickness; but to suggest that natural endowments, with perhaps a few weeks or months' training, should entitle these estimable people to be placed on the Register of Trained Nurses, is to render the Act a dead letter, as far as trained, certificated nurses are concerned. State Registration on such terms is not good enough. It is neither the protection to the nurse, nor to the public, for which the struggle was made. Scottish nurses must fight their own battles, of course. Still, many who register in Scotland or Ireland will want to do so in England as well, even though it does mean the payment of an additional fee. Therefore, I venture to suggest that every fully trained nurse in England, Scotland and Ireland should write to the Chairman of her Council demanding that there shall be one minimum standard for entry during the term of grace, just as we hope there will be one portal afterwards, and that the fee for registration shall not be less than one guinea.

I am, dear Madam,

Yours faithfully,

FLORENCE E. WISE.

24, Selby Road, Anerley, S.E.

[If our readers carry out the suggestion of our correspondent, and it is a "wise" one, letters or cards should be addressed to:—"The Chairman, General Nursing Council for England and Wales, Ministry of Health, Whitehall, London, S.W.1; The Chairman, General Nursing Council for Scotland, 13, Melville Street, Edinburgh.; and The Chairman, General Nursing Council for Ireland, 33, St. Stephen's Green, Dublin.—ED.]

### THE HOURS OF EMPLOYMENT BILL.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Busy though I am, I yet find time to read my B.J.N. from cover to cover, and wish to congratulate you on all the work you have accomplished, and wish you success in your future tasks. The nurses of the present and the future will gain immensely by what you are doing to-day on their behalf. Miss Macdonald and C. A. Little exactly express my own sentiments regarding the Hours of Employment Bill for Nurses, and I should like to see it carried through. Hospitals, infirmaries, asylums, &c., will come under it automatically, although in many of these institutions hours off duty were good. But it is when one is private

nursing, district nursing, or doing any Public Health work one also needs protection. I find in working amongst the working class that people who are exacting their eight hours, and who take care to drop tools and get their coats on before the going-off horn sounds, are very selfish in their demands on the District Nurse. Although one may be on duty from 9 a.m. till 10.30 p.m., with *sometimes* an interval for dinner and tea, which may be interrupted five times out of six, Sundays and holidays, this does not stop them from calling one up in the night; and should one stop work to appear in anything going on in the neighbourhood, someone whom one has had to leave unvisited, in consequence, has a grievance against the Nurse who could so far forget her duty, for which she had been trained, as to go to a place of entertainment. After five years' private nursing amongst the middle class, and four and a-half as a Public Health Nurse, I say get the Eight Hours maximum if possible; it will at least command respect. With every good wish, I beg to remain, Yours truly,

L. C. COOPER.

Queenborough District Nursing and  
Infant Welfare Department.

### STREET BEGGING FOR NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—I have read with interest your reply to Sir Richard Temple's criticism of your editorial, *re* the street collection for the Cavell Funds. I feel sure I am not speaking for myself alone when I say that I heartily agree with all you have said on the subject, both in your editorial and reply.

Not only is the idea of street begging repugnant to the large majority of the nursing profession, but surely it will entirely alter the feelings of all of us towards the Cavell Homes which such collections are presumably meant to support.

The outstanding feature of these Homes has been one of homely cheer and friendliness in the past, but in future no self-respecting member of the profession can accept free hospitality without feeling she is an object of charity. She must, therefore, pay her full board and lodging, or refrain from taking advantage of much-needed rest and recreation, in which circumstances the object for which the Homes were originally designed will be completely defeated.

Yours faithfully,

E. BRIGHT ROBINSON.

57, St. Mary's Street, Woolwich.

[A very large number of letters referring to State Registration qualifications and other burning questions are unavoidably held over.—ED.]

### OUR PRIZE COMPETITIONS.

December 4th.—Detail the preparations for the nursing of a case of abdominal section for disease of the gall bladder.

December 11th.—How would you administer a rectal saline (1) a single injection, and (2) continuous irrigation?

# The Midwife.

## CENTRAL MIDWIVES BOARD.

### PENAL CASES.

A special meeting of the Central Midwives Board was held at 1, Queen Anne's Gate Buildings, Westminster, when 13 midwives were cited to answer charges preferred against them with the following results.

*Struck off the Roll and Certificates cancelled:—* Eleanor Barkas (No. 19,507), Eliza Jane Carpenter (No. 47,141), Lily Edmondson (No. 45,149), Alice Mary Gardner (No. 13,317), Rosa Hellings (No. 17,945), Florence Maud Johnson (No. 14,996), Harriet Lomas (No. 3,429), Florence Elizabeth Skinner (No. 47,402), Harriet Smith (No. 17,367), Alice Swingle (No. 4,801), and Catherine Tyreman (No. 2131).

*Judgment deferred. Reports to be asked for from Local Supervising Authority in 3 and 6 months' time:—* Harriet Healey (No. 1,956) Margaret Hunter (No. 30,812).

### MONTHLY MEETING.

We regret we are compelled to hold over our report of the monthly meeting till next week.

## CENTRAL MIDWIVES BOARD FOR SCOTLAND.

### LIST OF SUCCESSFUL CANDIDATES.

The examination of the Central Midwives Board for Scotland was held on November 1st and 2nd. One hundred and thirty-eight candidates were successful in passing the examination at the following centres: Edinburgh, 39; Glasgow, 75; Dundee, 15, and Aberdeen, 9. Of these 50 were trained at the Royal Maternity Hospital, Glasgow, 23 at the Royal Maternity Hospital, Edinburgh, 20 at the Cottage Nurses' Training Home, Govan; 13 at the Maternity Hospital, Dundee; 7 by Queen Victoria's Jubilee Institute, Edinburgh; 6 at the Maternity Hospital, Aberdeen; and 19 at other recognised institutions.

### PENAL CASES.

At a meeting of the above Board for the hearing of Penal Cases, Sir J. Halliday Croom in the chair, charges were heard against Annie Maria Quillan (No. 1015) and Mary Espener (No. 2528) for breaches of the rules.

The Board found the charges proved, and instructed the Secretary to remove their names from the Roll of Midwives, and cancel their certificates.

A beautiful reredos of Carrara marble has been erected in the Allen Memorial Chapel at the Bristol Maternity Hospital, Southwell Street, Kingsdown, in memory of Mrs. Goodeve, President of the Hospital for some years. The chapel itself was her gift in memory of her nephew.

## TEACHERS' INSTRUCTION COURSE.

The inaugural meeting of the Midwifery Teachers' Instruction Course, organised under the authority of the Midwives' Institute, and held at the Royal Society of Arts, Adelphi, on November 23rd, attracted a large gathering of midwives, and promised well for the success of the week following. Miss Olive Haydon apologised to the nurses for giving them a strenuous week of not less than 20 hours' instruction, but she said that this was a condition of the Board of Education, which with the L.C.C., had given a grant of £65 towards the expenses. Miss Gibson, President of the Midwives' Institute, presided over the meeting.

Sir Francis Champneys' subject was the Aims of the Teachers Course from the standpoint of the Central Midwives Board. Speaking to teachers, he said that no person thoroughly knows a subject till he can teach it, and gave several valuable points to his listeners on the art of imparting knowledge. The knowledge of to-day would be quite insufficient a few years hence and therefore one should teach how to learn, which was the only way to keep pace with knowledge.

Dr. Menzies spoke from the standpoint of the Local Supervising Authority, and gave some interesting figures.

Midwives had this year attended in London at 44,600 births. He thought that if these figures were generally known, they would go far to remove the extraordinary ignorance of the public with regard to the work of midwives. Improved status could only be effected by public opinion. He called attention to the facilities now open to midwives as to obtaining medical aid, and said that in 1919, the L.C.C. had been called upon for no less than £4,268 for this purpose.

Dr. Macrory gave a very helpful address on the relations of the Inspectors to the Midwifery Teachers.

She said that if the midwife feared the inspector there was something wanting. She spoke of the desirability of the inspectors being medical women.

The inspector should look upon the Midwifery Teacher as her hostess, and on her part the teacher should take the lead in inviting inspection of her home, cupboards, books, etc.

She deplored the name inspector, and would welcome a title that would rather suggest a counsellor. The Inspector should not be the prophet of one particular method, as methods were bound to vary.

Miss Haydon proposed a vote of thanks to the Chairman and speakers, which was seconded by Miss Elsie Hall.

The course is continued throughout the week.







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